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ABSTRACT

The Program Standards Evaluation System was developed in response to evaluation requirements in the 1973 Rehabilitation Act. The system includes procedures for using standards data to monitor and evaluate vocational rehabilitation (VR) service outcomes and outputs as well as standards on key procedural issues. The system includes procedures for using standards data to monitor and evaluate program performance and to assist program managers in directing their programs toward improved performance. During the last two years, the system of standards has been pretested in six model evaluation unit states. This report summarizes the results of that pretest and includes final recommendations for refinement of the system. The report is organized into 10 chapters. Following an introduction in chapter 1, the next chapter presents an overview of the development of evaluation standards in VR, while chapter 3 deals with the uses of standards data as a tool in managing VR program operations. In the fourth chapter, the discussion of the pretest results begins, focusing on the eight performance standards, while in chapter 5 the discussion turns to the performance standards data collection forms. Chapter 6 digresses somewhat from the standards themselves to provide working illustrations of the analytic model developed for use by program managers. Chapters 7, 8, and 9 return to the standards system to examine the five procedural standards and the pretest results. Finally, chapter 10 summarizes the various changes that are recommended for the standards, data elements, and data collection forms in order to have the most useful and effective program standards system. (KC)

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VOCATIONAL REHABILITATION
PROGRAM STANDARDS EVALUATION SYSTEM
FINAL REPORT
VOLUME I: REPORT ON THE PROGRAM STANDARDS PRETEST

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PREFACE

The Program Standards Evaluation System was developed in response to evaluation requirements in the 1973 Rehabilitation Act. It has been designed with a focus on VR service outcomes and outputs, and on key procedural issues. The system includes procedures for using standards data to monitor and evaluate program performance, and to assist program managers in directing their programs toward improved performance. During the last two years, the system of standards has been pretested in six Model Evaluation Unit states. This report summarizes the results of that pretest, and includes Berkeley Planning Associates' final recommendations for refinement of the system.

The refined system contains 13 standards and associated data elements. Our recommendations for data collection procedures have resulted in greatly shortened client surveys, and have attempted to integrate new data collection needs into the routine data requirements to reduce burden of effort.

Berkeley Planning Associates would like to thank the MEU evaluation units for their participation in the pretest. We would also like to thank the San Diego State University RCEP IX for serving in its role in training and data analysis for the Procedural Standards Pretest. Finally, we would like to thank the University of Michigan RRI, and all RSA reviewers for their input into our pretest efforts.

This pretest report is Volume I of our final report on the system. Volume II covers the Analytic Paradigm, which describes the management uses of the system. Volume III, the Guidance Materials, includes the revised forms, reports, and instructions for preparing them. Volume IV is Training Materials for users of the system.

I. INTRODUCTION

The 1973 Rehabilitation Act contained, among its many other provisions, a requirement that evaluation standards be devised and implemented to measure the performance of the VR program in achieving its mandate. Over the last four years, Berkeley Planning Associates, under contract to the Rehabilitation Services Administration, has developed a revised system of evaluation standards. Two distinct sub-systems of performance measures were developed. One, the proposed Program Evaluation Standards, evaluates the federal-state VR programs. The other, the proposed Project Evaluation Standards, measures the effectiveness of individual projects, as well as aggregated program authorities funded by RSA discretionary funds. During the last three years, these systems were pretested in six model state evaluation units. In this pretest, BPA assumed the responsibilities which will ultimately be under the authority, and perhaps actual execution, of RSA, by providing training in the instruments and procedures for their administration, providing technical assistance to the states in conducting the pretest and analyzing their data, and providing the basic reporting of the states' performance. This report discusses the Program Standards pretest experience, and provides Berkeley Planning Associates' final recommendations for refinement of the Program Standards system.

The final recommended Program Standards consist of eight "performance" standards and associated data elements; and five "procedural" standards and associated data elements (see Table 1). The performance standards pertain to service outputs and outcomes (e.g., coverage, effectiveness, impact), while the procedural standards pertain to service method and process (e.g., case handling). If implemented, the Program Standards would require a revised reporting system for all state agencies. The federal administration would, in turn, generate information for measuring the achievement of overall program goals and for monitoring key processes which protect client interests. In addition, the system design includes a mechanism for analyzing and understanding the factors contributing to goal achievement, and for applying that understanding in support of federal and state program managers and policy

Table 1

VR Program Standards and Data Elements: Final Recommendations, 1981

PERFORMANCE STANDARDS AND DATA ELEMENTS

1. Coverage

VR shall serve the maximum proportion of the potentially eligible target population, subject to the level of federal program funding and priorities among clients.

(i) Clients served per 100,000 population
(ii) Percent severely disabled served

2. Cost-Effectiveness and Benefit-Cost Return

The VR program shall use resources in a cost-effective manner and show a positive return to society of investment in vocational rehabilitation of disabled clients.

(i) Expenditures per competitively employed closure
(ii) Expenditure per 26 closure
(iii) Ratio of total VR benefits to total VR costs (Benefit-cost ratio)
(iv) Total net benefit from VR services (Discounted net present value)

3. Rehabilitation Rate

VR shall maximize the number and proportion of clients accepted for services who are successfully rehabilitated, subject to the meeting of other standards.

(i) Percent 26 closures
(ii) Annual change in number of 26 closures

4. Economic Independence

Rehabilitated clients shall evidence economic independence.

(i) Percent 26 closures with weekly earnings at/above federal minimum wage
(ii) Comparison of earnings of competitively employed 26 closures to earnings of employees in state

5. Gainful Activity

There shall be maximum placement of rehabilitated clients into competitive employment. Noncompetitive closures shall represent an improvement in gainful activity for the client.

(i) Percent 26 closures competitively employed
(ii) Percent competitively employed 26 closures with hourly earnings at/above federal minimum wage
(iii) Percent noncompetitively employed 26 closures showing improvement in function and life status (implement after FAI/LSI pretest)

6. Client Change

Rehabilitated clients shall evidence vocational gains.

(i) Comparison of earnings before and after VR services
(ii) (In addition, changes in other statuses, and functioning ability, when such measures become available)

7. Retention

Rehabilitated clients shall retain the benefits of VR services.

(i) Percent 26 closures retaining earnings at follow-up
(ii) Comparison of 26 closures with public assistance as primary source of support at closure and at follow-up
(iii) Percent noncompetitively employed 26 closures retaining closure skills at follow-up (implement after FAI/LSI pretest)

8. Satisfaction

Clients shall be satisfied with the VR program, and rehabilitated clients shall appraise VR services as useful in achieving and maintaining their vocational objectives.

(i) Percent closed clients satisfied with overall VR experience
(ii) Percent closed clients satisfied with: counselor, physical restoration, job training services, placement services
(iii) Percent 26 closures judging services received as useful in obtaining their job/homemaker situation or in current performance

Table 1 (cont.)

PROCEDURAL STANDARDS

9. R-300 Validity

Information collected on clients by the R-300 and all data reporting systems used by RSA shall be valid, reliable, accurate, and complete.

10. Eligibility

Eligibility decisions shall be based on accurate and sufficient diagnostic information, and VR shall continually review and evaluate eligibility decisions to insure that decisions are being made in accordance with laws and regulations.

11. Timeliness

VR shall insure that eligibility decisions and client movement through the VR process occur in a timely manner appropriate to the needs and capabilities of the clients.

12. IWRP

VR shall provide an individualized Written Rehabilitation Program for each applicable client and VR and the client shall be accountable to each other for complying with this agreement.

13. Goal Planning

Counselors shall make an effort to set realistic goals for clients. Comprehensive consideration must be given to all factors in developing appropriate vocational goals such that there is a maximum of correspondence between goals and outcomes: competitive goals should have competitive outcomes and noncompetitive goals should have noncompetitive outcomes.

makers in decisions regarding changes in program procedures and policy, state needs for technical assistance, and program needs for further investigation.

This report discusses a wide variety of issues with respect to the Program Standards system and the Program Standards pretest. In Chapter II, we present an overview of the development of evaluation standards in VR, to give the reader an understanding of the context out of which the revised standards evolved.

Chapter III deals with the uses of standards data as a tool in managing VR program operations. First, we discuss our impressions on the current uses made by management personnel. Following this, we present a comprehensive model which describes how standards data can be used to inform decision making within the VR program.

In Chapter IV, we begin our discussion of the pretest results, focusing on the eight performance standards. Here, we discuss:

- the rationale for including the various standard and data elements in the overal Program Standards system;
- the comments received from reviewers in RSA, the MEUs, and other state agencies; and
- the results of the pretest data.

Finally, we present our response to the reviewer comments, and end with our recommendations as to whether the standard or data element should remain in the system as is, remain in a modified form, or be eliminated from the system.

Based on these recommendations, we turn next, in Chapter V, to the Performance Standards data collection forms. Here, we discuss such issues as:

- the training and implementation procedures involved in the particular data collection activity;
- the participants' evaluation of the pretest training activities;
- time investments by the participants in conducting the pretest activities; and
- findings on the level of missing data.

Again, as in Chapter IV, we end each discussion with our recommendations for the data which will be needed to address the revised standards.

In Chapter VI, we digress somewhat from the standards themselves, to provide working illustrations of the analytic model developed for use by program managers. Using Performance Standards data from the pretest, we show how agencies can investigate the reasons behind their problematic performance, and take steps to alleviate the problem.

In Chapters VII, VIII, and IX, we return to the standards system itself. These chapters concern the Procedural Standards. We treat the Procedural Standards separately from the Performance Standards, for several reasons. For one, the substantive foci of two sets of standards differs: whereas the performance standards pertain to service outcomes, the procedural standards pertain to service method and process (e.g., case handling). Second, the two systems require very different data collection methods. Finally, responsibility for much of the actual pretests (development of forms, training, data collection, and analysis) was split between two organizations, with BPA conducting the performance standards pretest and with the procedural standards pretest being conducted by our subcontractor, the Case Review Project within the San Diego State University RCEP. However, our purpose vis-a-vis the Procedural Standards is the same as for the Performance Standards: to arrive at final recommendations for system design. In Chapter VII, we present an overview of the Procedural Standards. Chapter VIII discusses the pretest results, including time investment by MEUs, reviewer comments, our response to those comments, and the pretest data results. Chapter IX summarizes the various issues raised during the pretest, and draws out the implications of those issues on a final recommended system design.

Finally, Chapter X summarizes the various changes we recommend making to the standards, data elements, and data collection forms in order to have the most useful and effective Program Standards system.

Overall, the standards system has been received favorably, and has benefited from review by many RSA and Vocational Rehabilitation researchers and administrators. We feel that the system presented herein will make a valuable contribution to the VR field as a tool for evaluation, management, and program improvement.

II. DEVELOPMENT OF EVALUATION STANDARDS IN THE VOCATIONAL REHABILITATION PROGRAM

One of the most frequently cited problems in the development of performance indicators in the social services is the difficulty of identifying outcome indicators. In the Federal-State Vocational Rehabilitation (VR) program there is a long tradition in the use of a single outcome measure -- employment of a disabled client 60 days after service and placement -- as the indicator of program success. This measure, while easy to understand, has been criticized as encouraging "creaming," or selecting only those clients who can most easily be trained and placed. An effort to develop more responsive measures was spurred by 1973 legislation which called for the development of evaluation standards for the program. One set of standards was developed and tried, with states reporting standards information to the Federal Rehabilitation Services Administration. Based on critiques of the initial standards, RSA began an effort to develop and refine a new set of standards. This new set of standards has been pretested, and may become the reporting requirements and performance measures for the state VR agencies. In terms of validity and concept, these standards have enjoyed a better reception than their predecessors; yet, the ultimate test will be in whether the standards are useful in the monitoring and improvement of performance in the system.

DESCRIPTION OF THE VR SYSTEM: HISTORICAL BACKGROUND

The Federal-State Vocational Rehabilitation (VR) Program provides resources to disabled persons who confront handicaps, and have vocational potential. The VR Program became law in 1920; passage of the legislation was assisted by the compelling economic argument that a self-supporting citizen was preferable, in terms of the national welfare, to a disabled person who was dependent upon public support. Initially, the legislation was concerned with providing medical services to the physically disabled which would enable them to find jobs. In subsequent amendments to the legislation, the scope of eligibility and services was expanded to include services to the family of the handicapped and to cases of psychological disorder, alcoholism and drug abuse. The Rehabilitation Act of 1973 included a mandate to serve the severely disabled, those with the most handicapping conditions and in need of more intensive services.

Consistent with the historical emphasis on employment, the success of service to a client has been measured by whether or not the client is "closed rehabilitated" or placed in a work situation for at least 60 days after closure. Competitive employment has been the favored placement, but "success" may also be claimed for placement in sheltered employment or in a homemaker or unpaid family worker situation. These last two are considered successes because performance of these roles may free other family members to enter the work force.

The 1973 Act also contained a provision calling for development and use of program performance standards. The Act provided that

> "The Secretary shall develop and publish general standards for evaluation of the programs and project effectiveness in achieving the objectives of this Act..." [P.L. 93-112, Section 401(3)(6)]

As the program shifted its priority to serve the more severely disabled, successful placements, particularly in competitive employment, became more difficult to earn. The program confronted inflationary costs at a time when its measure of productivity reflected less effectiveness. Within the program, an interest developed in examining alternative ways to measure performance and to direct the program.

THE 1974 STANDARDS

The 1973 Act called for publication of an initial set of standards by July 1, 1974, less than 10 months from the effective date of the Act (P.L. 93-112, September 26, 1973, Sec. 401 (3) b). The first standards, published in 1974, were prepared by RSA and reviewed by members of the Council of State Vocational Rehabilitation Administrators (CSAVR). These standards identified a number of features in the rehabilitation process. Because of the tight time frame between the legislative mandate and the scheduled time for announcement, these standards and their measures were not tested with state data; at this point, debate focused on the conceptual issues and on known results from previous studies or state experience.

The performance of each state agency was to be compared against other agencies. States would learn about their comparative performance after each state result was included in the standards analysis. Separate performance levels would be set for agencies who served only the blind.

The standards published in the Federal Register were as follows:

1. To insure that the rehabilitation program is serving the eligible disabled population and that these services are provided in an equitable manner.
2. To insure that rehabilitated clients are placed in gainful employment suitable to their capabilities.
3. To insure that undue delays are avoided in providing clients with VR services.
4. To insure that available resources are utilized to achieve maximum operational efficiency.
5. To insure that manageable-sized caseloads are maintained.
6. To insure that clients closed rehabilitated retain the benefits obtained from the rehabilitation process.
7. To insure that the need for post-employment services is satisfied.
8. To insure that agencies are consistently identifying reasons why clients are not successfully rehabilitated.
9. To insure that the client is satisfied with the vocational rehabilitation services as developed with the counselor. (Federal Register, Vol. 39, No. 128, July 2, 1974.)

For each of these standards, which focus heavily on compliance with the spirit and management of the rehabilitation process, "data elements" or statistical measures drawn from regularly reported client and program data were prepared. The norm for performance on most elements was set as plus or minus one standard deviation from the mean performance of all state VR agencies (plus or minus depending on whether a minimum or maximum value for the element was desirable.) Such an approach meant that for data elements with a normal or near-normal distribution, about 16% of the states would be "out of complaince." These standards were promulgated in the Federal Register with performance levels based on the year's performance.

States were required to send data submittals to RSA. States experienced a variety of hardships in preparing the required data for the standards, due to their varying data processing capabilities. While some states were able to handle these requirements through automated processes, others had to do hand calculations. Also, some states had their VR agencies located within social services "umbrellas." For these agencies, there was often difficulty in obtaining their share of data processing time or software support to respond to the new reqirements. There was no direct technical assistance available from RSA, even though RSA called on states to make the submittals.

The promulgation of the standards gave the states three implied evaluation changes:

(1) Development of capabilities for estimating the eligible disabled population (size and characteristics of the eligible population).

(2) Development of state capacity for evaluating the effectiveness of the state agency service process.

(3) Development of capabilities for determining the extent to which the rehabilitation agencies were achieving their objective.[1]

This call for program evaluation capacity faced states with the challenge of developing some program evaluation strategies for meeting the annual audit demands created by the new legislation (Rubin, op.cit.). To assist states in responding to these new demands, RSA awarded a grant to the University of Arkansas' Rehabilitation Research and Training Center. The Arkansas Project contained three phases. First, there was a National Program Evaluation Conference in Memphis, Tennessee, in October of 1974. This conference brought evaluators from state rehabilitation agencies, RSA regional offices, and universities to enchange ideas about program evaluation, and to develop study groups to examine specific methodological aspects of the RSA standards. Phase II was the study phase, when participants examined available data and methods for implementing the evaluation required by the published standards. There was a study team for each of the 10 RSA regions. The final phase was a meeting held in New Orleans in April of 1975. In this conference, the findings of the regional teams were presented to and discussed with state agency program evaluators.[2]

These studies focused on conceptual and measurement problems in the standards, and examined alternatives to the determination of such program concepts as:

- estimating state disabled population ;
- determining "manageable caseload size";
- measuring client satisfaction.

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[1] Sanford E. Rubin (ed.) Studies in the Evaluation of State Vocational Rehabilitation Agency Programs, Arkansas Rehabilitation Research and Training Center, University of Arkansas, November 1975.

[2] These findings were compiled in a series of working papers commonly referred to as the "New Orleans Report."

States themselves, in responding to the first announced standards, identified definitional issues, gaps in existing program data, and questioned the selection of the various standards and their measures. The performance on these standards was based on state norms, and comparability on many items was questioned.

The states gained experience on these standards, and over the years the definitional issues have been clarified and report formats developed and refined. This initial set of standards is still in effect in 1981 as the basis for state reporting on the standards.

While the original set of standards met the requirements for reporting set forth in the Act, RSA sought further development and refinement of the performance measurement. This first effort, while providing a beginning in the reporting process and in the idea of evaluation or performance standards, did not meet the conceptual test of expressing the goals and decision points of the program to the satisfaction of most of the actors involved. So, a developmental activity was supported; the aim was to learn from experience with the first standards in order to develop a better system.

STANDARDS DEVELOPMENTAL WORK: URBAN INSTITUTE

In 1975, RSA contracted with the Urban Institute to use a much more analytical approach to refining the standards. The Institute had proposed the development of a simulation model of the rehabilitation system, and the ultimate setting of standards performance levels based on analysis using the model.

There were a number of analytic problems to be solved in building such a model. Of the many VR processes, project and program activities, the Urban Institute finally chose to focus on eight "dimensions" of client flow through the program relating to client intake, program services, and program outputs:

- outreach;
- referral;
- client mix;
- service utilization;
- facilities utilization;

- timeliness;
- similar benefits (services obtained from other programs); and
- outcome mix.

The Institute staff examined each of these topic areas in a series of "issue papers." For each of the topics, the Institute suggested further analysis, mostly in the form of multivariate regression, on specific system questions as they emerged in issue papers. The Institute's recommendations typically called for procuedures to ensure adequate performance. For example, in Outreach and Referral, the Institute suggested two hypothetical standards:

> "If for any quarter, applicants to an agency do not contain sufficient persons of priority characteristics to assure caseloads mix objectives are reached, measured by a model of desired proportion in caseload and rate of case closures, the agency will exercise outreach efforts." (Turem, p. 43.)
>
> "Each state agency will conduct an annual analysis of its referral sources to determine whether such sources are sending suitable clients for services. An agency or organization having a high rate of referrals who are not accepted, or if accepted, are not rehabilitated will be provided with specific written guidance on which clients have been referred improperly, why and what to do to reduce this rate." (Turem, p. 44.)

The Institute, in its final reports, criticized the existing standards system and recommended development of sophisticated statistical techniques needed for comparison of state programs leading to a comprehensive micro-simulation or "overall evaluation framework." (Urban Institute, 1976.)

The Institute effort resulted in focusing RSA and state attention on a number of conceptual and analytical problems and issues inherent in the development of standards. As a developmental study, it did not result in changes in the existing standards.

STANDARDS REVISION: BERKELEY PLANNING ASSOCIATES

In the Fall of 1976, RSA again called for further development and refinement of the standards through a contract with Berkeley Planning Associates (BPA). This work was to draw from the previous efforts, but called for a new conceptual approach to the development and refinement of the standards.

By this time states had prepared one submittal in the RSA standards and were preparing to submit another. BPA began its developmental effort by discussing the standards with administrators, researchers, and data personnel in several state rehabilitation agencies, to determine state agency views of the relevance and usefulness of the current standards, to identify standards implementation issues in state programs, and to identify state agency views relevant to continuing development and design of the VR standards. At that time, BPA found little evidence that the standards were used or considered useful by state personnel. On the contrary, we found that:

- There had been almost no impact on basic service delivery as a result of implementation of the nine standards.
- Rehabilitation counselors did not typically know about the standards.
- For the most part, the standards were perceived in the States simply as a federal reporting requirement, not as useful in the states' own planning and evaluation processes.
- The implementation of the standards had been complicated by incomplete instructions on methods and definitions to use, and by untimely substantive feedback by RSA to the states on their submittals.
- State administrators did not stress the standards in their agencies. Rather, the standards remained the domain of research or evaluation staff without direct connection to management.
- The states had no clear sense of what RSA would do with the data submitted on the standards, or what direction the standards system might take.

In short, the standards had not as yet succeeded in their intended purpose: to assist RSA and the states in measuring performance and directing the program towards improved performance. Some of these problems have since been alleviated. For example, RSA now provides standards performance reports and other feedback to states. In point of fact, the short time frame for developing and implementing the standards had not allowed RSA to develop the reporting systems or technical assistance capacity necessary for smooth state implementation early on. State submittals, once prepared, were sent to Washington. However, the central office, did not have the staff resources to immediately process submittals, or even to review the submittals and answer substantive questions on their contents. Eventually, this problem was alleviated through contracts, first with JWK and later with the Rehabilitation Research Institute at the University of Michigan, for statistical analysis of the submittals and the preparation of state reports. Still, problems exist in this feedback mechanims. First, the reporting system does not operate in a manner timely enough to make the standards useful for program managers. Even six years after the initiation of the requirement, the lag time for reports was such that the 1977 and 1978 information was available on in the summer of 1980. The 1979 information was available in the summer of 1981. This lack of prompt feedback has limited the utility of the reports for managers.

The reports themselves limit the usefulness and the distribution of the standards. The standards are published in sets containing one volume for each of the 83 agencies plus a summary volume of national information. Consequently, the reports are bulky and expensive to produce and ship. While these reports are quite thorough in their presentation of comparative and historical information for each data element for each state, they do not lend themselves to wide distribution, or to quick scans by administrators.

The Dimensions of Program Accomplishment: Identification of Standards

The states' reaction to the 1974/75 standards, and the clear indication of lack of use, pointed to the need for reassessing the content and purpose of a performance standards system for rehabilitation. One general criticism of both the published standards and the suggestion by the Urban Institute was that measures of processes, of compliance issues, and of program impacts were mixed together without an underlying conceptual framework.[1] BPA's new design effort began with an examination of alternative conceptual approaches to the development of standards. A review of standards-setting in other social service fields[2] showed a variety of approaches, from a focus of inputs (either as structural or "gate-keeping" eligibility standards) to processes (measures of "best practice") to outcomes (or program impacts).

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[1] VR Program Evaluation Standards: A Critique of the State of the Art. Berkeley Planning Associates, Berkeley, California, January 7, 1977, p. 158.

[2] Ibid, pp. 42-48.

After analysis of the strengths and weaknesses of these alternative approaches,[1] an approach which emphasized program outcome was recommended. This approach was favored because BPA felt that to guide performance and measure achievements, "standards and their data elements (measures) should be expressive of, and allow measures of achievement of overall program goals."[2] The designers identified three levels of questions regarding program activity, as shown in Table 2.

BPA postulated that compliance concerns were best handled through audits and other review procedures, and that performance evaluation should focus on the second- and third-level questions measuring and relating to goal achievement. Many compliance questions relate specifically to whether or not the regulations are being followed to the letter (e.g., is there a client signature in the written plan? did the counselor record the date of plan completion?), rather than program effects. Concerns at this level detract from a focus on outcome by concentrating on processes. BPA thus argued that standards and their data elements should be developed only for those dimensions which directly measure program outcome. Other evaluation, monitoring and research activity, supportive of the standards, could be carried out to investigate areas of problematic performance.

To identify the dimensions which should fall into the performance standards category, BPA analyzed the rehabilitation regulations and administrative manuals and developed a much more detailed model of the client flow process (summarized in Figure 1). This model identified over 70 decision points. For each point in the detailed model, program problems and decisions were listed. These problems and decision lists in turn led to the development of an initial set of candidate areas for standards. An example of this analysis is shown in Table 3. Through use of this process, 71 candidate areas for standards were identified by BPA in conjunction with RSA and an advisory committee representing the Council of State Administrators of Vocational Rehabilitation (CSAVR).

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[1] Alternative Conceptual Approaches to Standards (Working Paper #2), Berkeley Planning Associates, Berkeley, California, March 25, 1977.

[2] Recommendations for VR Program Evaluation Standards, Berkeley Planning Association, Berkeley, California, September 30, 1977. (Revised) p. 5.

Table 2

Levels of Program Evaluation Activity

Question	Evaluation Activity
1. Is the activity in compliance with the regulations? (Whether or not it affects outcome)	Compliance audits, case reviews.
2. Does the activity contribute to the achievement of program goals?	Program Monitoring, evaluation, and research on effectiveness of processes
3. Does the measure directly reflect program effectiveness, coverage, or impact in meeting stated objectives?	Standards for program performance

Figure 1: A Simple Model of the Rehabilitation Process and Statuses

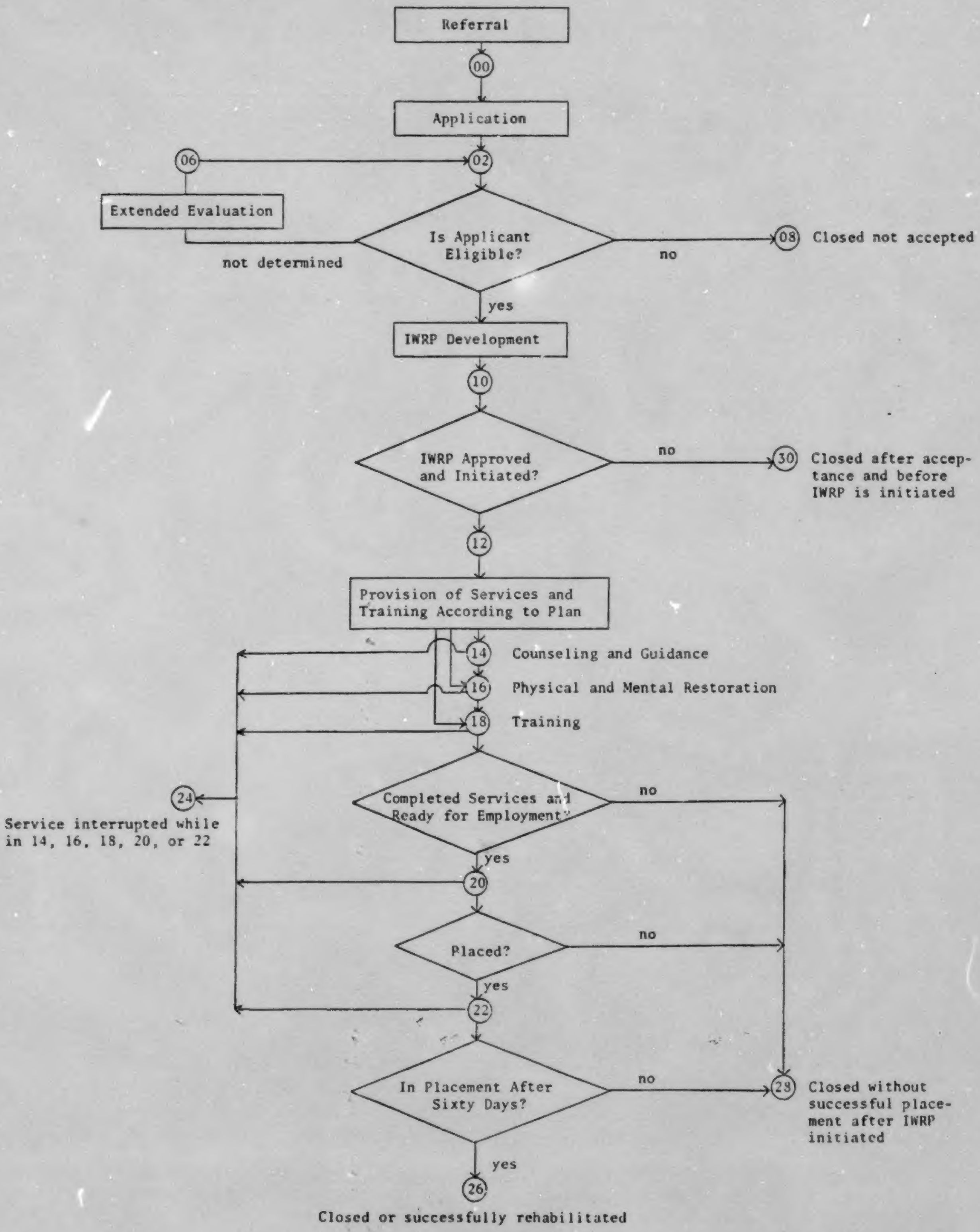
Referral
00
Application
06
02
Extended Evaluation
Is Applicant Eligible?
not determined
no
08
Closed not accepted
yes
IWRP Development
10
IWRP Approved and Initiated?
no
30
Closed after acceptance and before IWRP is initiated
12
Provision of Services and Training According to Plan
14
Counseling and Guidance
16
Physical and Mental Restoration
18
Training
24
Service interrupted while in 14, 16, 18, 20, or 22
Completed Services and Ready for Employment?
no
yes
20
Placed?
no
yes
22
In Placement After Sixty Days?
no
28
Closed without successful placement after IWRP initiated
yes
26
Closed or successfully rehabilitated

Table 3

Example Candidate Area Identification for a VR Decision Point[1]

Decision Point	Client Provided Services According to IWRP (Written Plan)
Problem(s):	Clients may not receive all the services specified in the IWRP in the amounts and in the time schedule specified, thereby rendering the service plan less effective and breaking the agency's agreement.
Decision(s):	Require agencies to investigate cases where movement through statuses exceeds time norms to determine whether there is a problem needing redress.
Candidate Area(s):	Agencies shall insure that clients move through the rehabilitation process in a timely and coordinated manner.

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[1] Berkeley Planning Associates, *Specification of Candidate Areas for Standards, and the Conceptual Approach Underlying the Standards System* (Working Paper 5), 1977. This example is from Appendix 1 "Elements of Detailed VR Client Flow Model: Problems, Decisions, Candidates for Standards," p. 16.

While the process of moving from analysis of the client flow to the identification of candidate areas provided the opportunity to be "comprehensive," the resulting plethora of possible measures would likely obscure rather than clarify the measurement of performance. If administrators were to become key users of the standards information, this set needed to be reduced to the essential performance measures for the program. Therefore, each candidate area was analyzed with respect to such criteria as conceptual design, measurability, management utility, and ease of implementation. Table 4 lists the various criteria used. These analyses explored each measure's strengths and weaknesses on each criterion, documented any existing related program research, and presented recommendations for the role of the candidate area in the standards system. For each of the 71 candidate areas, project staff, RSA and the advisory committee discussed whether these program dimensions should be regarded as performance standards, procedural standards, or supportive evaluation elements.

Performance standards would measure the achievement of a desired outcome or mission of the program (e.g., competitive employment closures). Data elements on the standards would be reported annually for each VR agency.

Procedural standards would address protection of client interest by ensuring key processes rather than measuring ultimate program performance. No standardized performance level would be set due to legitimate individual differences among clients (e.g., the "timeliness" concerns expressed in Table 3). Performance on these standards would be measured through stipulated procedures (such as review of a sample of cases annually) executed on a regular basis.

Supportive evaluation elements are aspects of the VR process useful in the analysis of performance to explain differences and to help identify program actions to enhance performance on standards. These are the independent variables in causal models of the program, where performance outcome (O) is seen as dependent on a number of environmental (E), client (C), and process (P) characteristics. O=f (E,C,P). Data for these elements might come from routine client data and/or special studies.

The analysis of the 71 candidate areas resulted in 11 candidates for performance standards, 7 for procedural standards, and 17 areas for

Table 4

Criteria for Standards Development

Criteria for Conceptual Soundness

- Appropriateness
- Validity
- Uniqueness (non-redundancy)
- Completeness
- Internal Consistency
- Comprehensiveness
- Policy Consistency
- Flexibility
- Compliance Adequacy
- Explicitness of Assumptions

Criteria for Measures of Concept

- Methodological Utility
- Data Quality

Criteria for Management Utility

- Efficiency
- Evaluative Utility
- Controllability
- Cost Effectiveness

Criteria for Ease of Implementation

- Clarity
- Cost
- Controllability
- Face Validity
- Capability

supportive evaluation. The remaining 36 original candidates were dropped from further consideration as having no direct relationship to program mission, as being a compliance concern, or as failing to meet system design criteria. Next, BPA conducted further analysis, refinement and reduction to achieve a balance so that individual standards would complement one another. This was necessary because goals of the program were in tension; for example, serving more clients (coverage), was "better", subject to overall cost (efficiency). Obtaining high numbers of successful closures (impact) was desirable, but should be done with concern for service coverage and cost. The program trade-offs between coverage, efficiency, and impact are suggested in Figure 2. This further refinement reduced the number of performance standards to eight, with four additional procedural standards, shown in Table 5.

The Measurement of Performance: Identification of Data Elements

It is one thing to express a program goal such as "increased client economic independence for clients" or "use of resources in a cost-effective manner." It is another thing to specify measures of such concepts. Criticisms from the earlier standards make it apparent that it was the measure rather than the concept of standards or the standards themselves which had met with criticism in the New Orleans report, in the Urban Institute's work, and in most state critiques of the standards. The next design task for BPA was to recommend appropriate measures for each of the standards. The performance standards needed discrete measures of different aspects of program performance.

Table 6 illustrates the list of data elements recommended for measuring achievement of the goals implied by each of the performance standards. For the procedural standards, assessment would occur not in terms of discrete data elements, but rather through audit-type analyses covering a wide range of compliance, process, and data quality issues.

To identify the most appropriate data elements for the standards, BPA first reviewed the availability of data at the state and federal levels. The VR system has an extensive client-based data system, based on stage agencies routinely sending data on closed cases to RSA annually, in addition to a number of reports and plans containing aggregate data. To pretest alternative

Figure 2

Program Trade-Offs

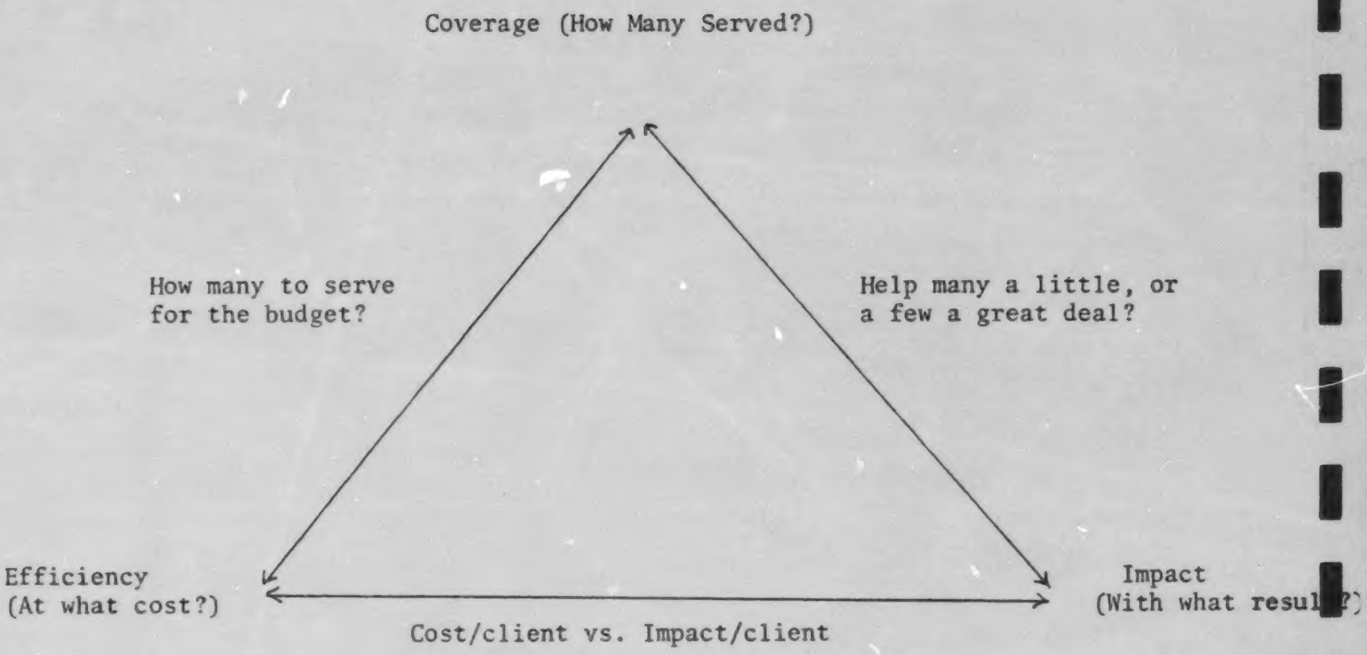
Coverage (How Many Served?)
How many to serve for the budget?
Help many a little, or a few a great deal?
Efficiency (At what cost?)
Impact (With what resul?)
Cost/client vs. Impact/client

Table 3

1978 RECOMMENDED PROGRAM STANDARDS

Performance Standards

1. VR shall serve the maximum proportion of the potentially eligible target population, subject to the level of federal program funding and priorities among clients.

2. The VR program shall use resources in a cost-effective manner and show a positive return to society of investment in vocational rehabilitation of disabled clients.

3. VR shall maximize the number and proportion of clients accepted for services who are successfully rehabilitated, subject to the meeting of other standards.

4. Rehabilitated clients shall evidence increased economic independence.

5. There shall be maximum placement of rehabilitated clients into competitive employment. Noncompetitive closures shall be in accordance with the IWRP goal and shall represent an improvement in gainful activity for the client.

6. Vocational gains shall be attributable to VR services.

7. Rehabilitated clients shall retain the benefits of VR services.

8. Clients shall be satisfied with the VR program, and rehabilitated clients shall appraise VR services as useful in achieving and maintaining their vocational objectives.

Procedural Standards

9. Information collected on clients by the R-300 and all data reporting systems used by RSA shall be valid, reliable, accurate, and complete.

10. Eligibility decisions shall be based on accurate and sufficient diagnostic information, and VR shall continually review and evaluate eligibility decisions to ensure that decisions are being made in accordance with laws and regulations.

11. VR shall ensure that eligibility decisions and client movement through the VR process occur in a timely manner appropriate to the needs and capabilities of the clients.

12. VR shall provide an Individualized Written Rehabilitation Program for each applicable client, and VR and the client shall be accountable to each other for complying with this agreement.

Table 6

SUMMARY TABLE OF DATA ELEMENTS RECOMMENDED BY BPA AS MEASURES OF THE EIGHT PERFORMANCE STANDARDS

Standard	Data Elements
#1 Coverage	(i) % of National Caseload Served/% of National VR Budget
	(ii) Clients served/100,000 state population (total)
#2 Benefit-Cost and Cost Effectiveness	(i) Expenditure per competitively employed closure
	(ii) Expenditure per 26 closure
	(iii) Benefit-cost ratio
	(iv) Discounted net present value
#3 Rehabilitation Rate	(i) Percent 26 closures
#4 Increased Economic Independence	(i) Percent 26 closures with weekly earnings at/above federal minimum wage
	(ii) Comparison of earnings of competitively employed 26 closures to earnings of employees in state
	(iii) Comparison of earnings before and after VR services
	(iv) Comparison of 26 closures with public assistance as primary source of support before and after VR services
#5 Competitive Employment	(i) Percent 26 closures competitively employed
	(ii) Percent 26 closures with hourly earnings at/above federal minimum wage
	(iii) Percent 26 closures with competitive outcome or with non-competitive outcome and non-competitive goal
	(iv) Percent non-competitively employed 26 closures showing improvement in gainful activity
#6 Causality	(i) Comparison of earnings change from referral to closure of 26 closures to earnings change of a control group
#7 Retention of Benefits	(i) Percent 26 closures retaining earnings at follow-up
	(ii) Comparison of 26 closures with public assistance as primary source of support at closure and at follow-up
	(iii) Percent non-competitively employed 26 closures retaining closure skills at follow-up
#8 Client Satisfaction and Utility Appraisal	(i) Percent closed clients satisfied with overall VR experience
	(ii) Percent closed clients satisfied with specific aspects of VR
	(iii) Percent 26 closures judging services received to have been useful in obtaining their job/homemaker situation
	(iv) Percent 26 closures judging services received to be useful in current performance on the job/homemaker situation

measures, BPA used annual data tapes and other relevant sources to determine which of the possible measures best expressed the intent of the standard, which were most readily constructed from existing data systems, and which would be of most use to program evaluators and administrators.

As an example of the measurement problem and the direction taken for resolution, consider the first performance standard, which relates to coverage:

> "VR SHALL SERVE THE MAXIMUM PROPORTION OF THE POTENTIALLY ELIGIBLE TARGET POPULATION, SUBJECT TO THE LEVEL OF FEDERAL PROGRAM FUNDING AND PRIORITIES AMONG CLIENTS."

A serious methodological problem -- that of estimating those "potentially eligible" for service -- impedes the precise measurement of performance on this standard. Those eligible for service, remember, are those with a handicap and vocational potential. No regularly collected population survey yields this particular item. Nor is it possible to derive these estimates through cross-tabulation or other manipulation of existing surveys.[1]

In spite of the lack of a precise measure for the target population, coverage was regarded as an important aspect of performance in a quality program by state participants in the developmental process. Therefore, in the absence of a precise estimate, two coverage "proxies" were identifed as measures of performance on this standard:

(i) % of National Caseload Served/% of National VR budget

(ii) Caseload served/100,000 state population (total).

Both of these measures could be constructed from generally available data, but each has a disadvantage, compared to the ideal discussed above.

Alone, each is vulnerable in that neither expresses the standards. However, each does have face validity for administrators. While the first perhaps expresses more of an efficiency than a coverage concern, the second had already been broadly used by state and RSA as a measure of coverage. The two together were seen as expressing coverage effort while providing some acknowledgement of the funding resources available to the agency. Moreover, if usable estimates of the target population were to become available later, BPA pointed out that the data elements or measures for the standard could be refined or respecified. So long as the program mission and values remained the same, the standards would remain. However, changes in program knowledge or in data availability or experience with use of the standards, might result in changes in the data elements or even additions to the standards themselves as measurement problems were solved.

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[1] See Worrall, J. "Some thoughts on the nature and size of the VR target population," Bureau of Economic Research, Rutgers University, November 1974; Ridge, Susan Shea Estimating the Need for Rehabilitation Services, Working Paper #1821/KS009, Institute of Urban and Regional Development, University of California, Berkeley, 1972; Worrall, J. and Schoon, C., "Methodologies for the Estimation of the VR Target Population: An Exploratory Analysis," in Rubin, S. ed., op. cit.; and Nagi, S. "Estimates of Target Populations for State and Federal Rehabilitation Programs," Ohio State University, Columbus, Ohio, 1974.

Analysis and debate followed in this fashion for the data elements of each of the other seven standards. Balance between elements, both within and across standards, remained an important design consideration.

Standards Revision: Summary

As a starting point for BPA's refinement of the standards, it was clear to us that there must be an understanding of the role standards should play, in order that the pitfalls of the existing standards might be avoided. Based on considerable interaction among BPA, the Rehabilitation Services Administration (RSA), and representatives of several state agencies, the following ground rules were adopted:

- Standards and their data elements should be expressive of, and allow measures of achievement of overall program goals. In essence, a standard is an acknowledged program objective -- a criterion or norm against which performance is assessed. It expresses an expected level of performance whose achievement is "desired," "good," or "appropriate."
- It is important that program evaluation focus not only on the impact, or degree of effectiveness of the program for individuals, but also on coverage, or the number of clients served. A system of evaluation standards for program performance, thus, should address effectiveness and efficiency and relate to coverage and impact issues.
- In addition to their function in an evaluation system, the role of standards has another dimension -- that of representing

the goals of a program, the direction in which it desires to move, and the conditions which represent success for the program. Thus, standards, incorporated with an implicit or explicit reward or sanction system may become behavioral incentives: program administrators, presented with a set of standards against which performance will be measured, may begin to move programs in the directions implied by the set.

- If there are too many standards, covering too many elements of a program, there will be no clarity for program direction and attention may become too diffused, with administrators required to attempt to meet norms for elements which may be less critical than others, and which, in fact, may not make a positive contribution to the ultimate goal of the process, i.e., gainful employment of clients.

The refinement process for the program standards entailed developing standards and data elements by which they could be measured, specifying an approach to setting performance levels and adjusting the data for across-state comparability, and proposing implementation guidelines to RSA and the states. Berkeley Planning Associates issued reports[1] addressing these design steps as follows:

- Previous work on VR program evaluation standards: Implications for further refinement of standards of the work done by each region reported in the "New Orleans Report," and of the work done by the Urban Institute, JWK Corporation, and others in analyzing the current standards and proposing improvements. (Report of January 1977)
- Reactions and recommendations of selected state agencies: Appraisal of what has been the states' experience with the standards, in reporting on them, in their effect on the state program and changes states would like to see made. (Report of January 1977)

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[1] Readers interested in detail in this material should consult the primary documents submitted to RSA and available from the Evaluation Division.

- Review and critique of the current standards: Analysis of how well current standards measure up conceptually and technically in terms of RSA concerns, perspectives of state agencies, needs of Congress and DHEW, in the view of outside research and evaluation groups. (Report of January 1977)
- Criteria for developing standards: Discussion of appropriate conceptual measurement, management and implementation criteria which must be met for the constitution of a "good" standard and set of standards. (Working Paper 1, February 1977)
- Conceptual approaches to standards development: Presentation of alternative approaches which can be taken in developing a set of standards for the VR program. (Working Paper 2, March 1977)
- Candidate areas for the selection of standards: Analysis, within the VR process, of what are the discrete inputs, processes and outcomes which should be considered as candidates for standards. Evaluated in terms of the appropriate conceptual framework and criteria for developing standards, candidate standards were selected which met the test as being appropriate candidates for proposed standards. (Revised Working Paper 3, August 1977)
- Recommendations for VR program evaluation standards: Presentation of the recommendations for the end of the first year. (RSA-IM-78-30, February 1978)
- Data items associated with standards: Analysis of the availability and validity of alternative data elements proposed as possible measures of the performance standards, as well as pretest results and preliminary recommendations of data elements for further consideration. (Working Paper 4 and Supplementary Memorandum, March and April 1978)
- Use of composite measures for assessing agency performance on the standards: Discussion of the strengths and weaknesses of developing a composite measure to summarize agency performance. (Working Paper 4, March 1978)

- Issues, approaches and recommendations for the development of procedural standards: Discussion of the background and development of the procedural standards, and the adoption of a uniform case review mechanism. (Revised Working Paper 5, May 1978)
- Data collection, data validation and processing, and analysis: Presentation of the recommended data collection sources and specific data items for each data element for both performance and procedural standards, along with data validation and processing procedures. Preliminary review and recommendations presented with respect to comparability adjustments, performance level expectations, and analysis. (Revised Working Paper 5, May 1978)
- A guide for implementation: Following data collection revisions and refinements to the performance level and comparability adjustment approaches, the implementation issues were discussed. These included sampling, allocation of responsibilities, and the proposed scheduling of activities and reports. (Working Paper 6, July 1978)
- Proposed demonstration projects: Design of 11 demonstration projects to assist in the further development of the VR evaluation standards. (Working Paper 7, September 1978)
- The VR Program Evaluation Standards: Final Report: Presents the recommended standards and data elements and their coverage of the major decision points within the VR process. Presents data collection needs for each standard and data collection instrument design. Specifies data validation processing procedures, and data analysis. Presents recommendations for implementation. (November 1978)

BPA recommendations on these issues were finalized with the assistance of RSA staff and the CSAVR representatives who had participated throughout the development of the standards and data elements.

These standards and data elements were sent to state agencies and other rehabilitation researchers and evaluators by RSA in 1978 with a call for comments and review. BPA's development of the standards had resulted in a new design. The next step would be a test of reporting systems and use.

PRETESTING THE REVISED STANDARDS: THE PROCESS

RSA had learned a lesson in the first round of standards development. The imposition of required standards and their data elements, without a trial period, had resulted in a number of very valid criticisms. Rather than require a wholesale change-over to the new system, RSA sponsored a pretest of the BPA-developed standards system as one part of a demonstration project to stimulate program evaluation (PE) activity in state rehabilitation agencies. Six Model Evaluation Units (MEUs) were created in selected state agencies (the Michigan general agency, the Pennsylvania, Oregon, Delaware, and Virginia combined agencies, and the Mississippi blind agency) to demonstrate what enhanced evaluation capacity could do in state management and to pretest data collection instruments and the proposed standards. These agencies for the past two years have pre-tested not merely the refined program standards, but also the facility standards and evaluation systems developed by RSA and Walker Associates, the BPA-developed project standards, and a wide variety of other evaluation technologies and innovative approaches. In addition, several other organizations played a role in the pretest:

San Diego State University RCEP had developed the Case Review system to be used for data requirements of procedural standards which were a part of the standards system. SDSU became a subcontractor in the BPA contract. SDSU's own training and assessment efforts involving the case review instrument began prior to the pretest, however. Consequently, the MEU training in the instrument, and the coordination of the case review activity with the BPA pretest schedule was not possible.

West Virginia Research and Training Center (WVRT) became the coordinating contractor for the MEUs, the standards, and other involved contractors. The WVRT effort began at the same time as the BPA contract. Among the responsibilities West Virginia had in this overall effort was the convening of Advisory Committee meetings for the MEUs, the standards and other contractors.

Texas Institute for Rehabilitation Research (TIRR) was included in BPA's contract as a subcontractor for the development of estimates for benefit-cost models of rehabilitation.

The pretest itself began with the refinement of the forms and supporting materials needed for the clearance of the pretest by the Office of Management and Budget (OMB) and the preparation of training materials. A training of Model Evaluation Staff (MEUs) was conducted in Houston, Texas.

Following the training, MEUs participated in the pretest; the details of data collection appear in later sections of this report. During data collection, BPA provided assistance. The collection of state data for the pretest was completed in 1980, with the six participating states each providing client data needed for the data elements and for the procedural standards. Performance for each of the six states, based on the new elements, was calculated as a part of the pretest. Data reliability and validity, as well as the MEU's analysis of the usefulness of the data, was also reported. MEUs commented on their experience during the standards pretest including the time taken to install the system in their agencies.

For the most part, the standards received favorable comments on their technical merits. There were many suggestions from the participating agencies regarding the refinement or more specific definition of some elements of the data elements. Berkeley Planning Associates has used the experience of the MEUs and other reviewers to further clarify the data elements, and to recommend a final set of standards for implementation.

FINAL RECOMMENDATIONS FOR STANDARDS AND DATA ELEMENTS

The new recommended goals and data elements for measuring and monitoring their achievement are shown in Table 7. This table compares the currently proposed standards and data elements following the pretesting and further refinements with the BPA proposals of 1978 which were the focus of the pretest and with the existing standards promulgated and in use since the mid-1970s. A close examination of the table will reveal that the changes since the pretest are relatively small and technical, as compared to the differences between the BPA standards and the existing standards. Reviewed individually, the standards are as follows:

Table 7

Evolution of VR Program Standards

Performance Standards

1981 Revised BPA Standards	1976-1978 BPA Standards	1975 General Standards for Evaluation
1. VR shall serve the maximum proportion of the potentially eligible target population, subject to the level of federal program funding and priorities among clients (i) Clients served per 100,000 population (ii) Percent severely disabled	1. VR shall serve the maximum proportion of the potentially eligible target population, subject to the level of federal program funding and priorities among clients (i) Comparison of caseload served to expenditures (ii) Clients served per 100,000 population	1. To insure that the rehabilitation program is serving the eligible disabled population and that these services are provided in an equitable manner (i) Estimate of the total population eligible for VR services (ii) Number of accepted cases served (statuses 10-30) for the year (iii) Percent of annual increase or decrease in number of accepted cases served (statuses 10-30)* (iv) Number of cases closed rehabilitated during the year (status 26) (v) Accepted cases (statuses 10-24) as a percentage of the total of cases closed not accepted (status 08) plus those cases accepted (statuses 10-24)
2. The VR program shall use resources in a cost-effective manner and show a positive return to society of investment in vocational rehabilitation of disabled clients (i) Expenditures per competitively employed closure (ii) Expenditure per 26 closure (iii) Benefit-cost ratio (iv) Discounted net present value	2. The VR program shall use resources in a cost-effective manner and show a positive return to society of investment in vocational rehabilitation of disabled clients (i) Expenditure per competitively employed closure (ii) Expenditure per 26 closure (iii) Benefit-cost ratio (iv) Discounted net present value	4. To insure that available resources are utilized to achieve maximum operational efficiency (i) Average case service cost per accepted case closure (statuse 26, 28 and 30) where case service cost to the state vocational rehabilitation agency was involved (ii) Percent of clients receiving rehabilitation services at no cost to the vocational rehabilitation agency (iii) Percent distribution of total vocational rehabilitation dollars spent for agency operations each fiscal year as reported on the RSA-2 expenditure report (iv) Average case service cost per type of vocational rehabilitation case service involving cost to the state agency, and percentage of individuals receiving specific vocational rehabilitation service
3. VR shall maximize the number and proportion of clients accepted for services who are successfully rehabilitated, subject to the meeting of other standards (i) Percent 26 closures (ii) Annual change in number of 26 closures	3. VR shall maximize the number and proportion of clients accepted for services who are successfully rehabilitated, subject to the meeting of other standards (i) Percent 26 closures	2. To insure that rehabilitated clients are placed in gainful employment suitable to their capabilities (i) Percent of those placed in competitive employment (wage and salary earners and self-employment) (ii) Percent of those places in noncompetitive employment (sheltered workshop and others) (iii) Percent of those placed as homemakers (iv) Percent of those places as unpaid family worker (v) Percent of those placed in business enterprise program

* This data element does not appear in the 1979 analysis.

Table 7 (continued)

Performance Standards (continued)

1981 Revised BPA Standards	1976-1978 BPA Standards	1975 General Standards for Evaluation
4. Rehabilitated clients shall evidence economic independence (i) Percent 26 closures with weekly earnings at/above federal minimum wage (ii) Comparison of earnings of competitively employed 26 closures to earnings of employees in state	4. Rehabilitated clients shall evidence increased economic independence (i) Percent 26 closures with weekly earnings at/above federal minimum wage (ii) Comparison of earnings of competitively employed 26 closures to earnings of employees in state (iii) Comparison of earnings before and after VR services (iv) Comparison of 26 closures with public assistance as primary source of support before and after VR services	2. To insure that rehabilitated clients are placed in gainful employment suitable to their capacities (vii) Average weekly earnings in the week before referral of all rehabilitated clients, including clients with zero earnings (viii) Average weekly earnings at closure of all rehabilitated clients, including clients with zero earnings
5. There shall be maximum placement of rehabilitated clients into competitive employment. Noncompetitive closures shall represent an improvement in gainful activity for the client (i) Percent 26 closures competitively employed (ii) Percent competitively employed 26 closures with hourly earnings at/above federal minimum wage (iii) Percent noncompetitively employed 26 closures showing improvement in function and life status	5. There shall be maximum placement of rehabilitated clients into competitive employment. Noncompetitive closures shall be in accordance with the IWRP goal and shall represent an improvement in gainful activity for the client. (i) Percent 26 closures competitively employed (ii) Percent 26 closures with hourly earnings at/above federal minimum wage (iii) Percent noncompetitively employed 26 closures showing improvement in gainful activity (iv) Percent 26 closures with competitive outcomes or with noncompetitive outcome and noncompetitive goal	2. To insure that rehabilitated clients are placed in gainful employment suitable to their capabilities (i) Percent of those placed in competitive employment (wage and salary earners and self-employment)
6. Rehabilitated clients shall evidence vocational gains (client change) (i) Comparison of earnings before and after VR services (ii) (In addition, changes in other statuses, and functional ability, when such measures become available)		

Table 7 (continued)

Performance Standards (continued)

1981 Revised BPA Standards	1976-1978 BPA Standards	1975 General Standards for Evaluation
	6. Vocational gains shall be attributable to VR services (causality) (i) Comparison of earnings change from referral to closure of 26 closures to earnings change of a control group	
7. Rehabilitated clients shall retain the benefits of VR services (i) Percent 26 closures retaining earnings at follow-up (ii) Comparison of 26 closures with public assistance as primary source of support at closure and at follow-up (iii) Percent noncompetitively employed 26 closures retaining closure skills at follow-up	7. Rehabilitated clients shall retain the benefits of VR services (i) Percent 26 closures retaining earnings at follow-up (ii) Comparison of 26 closures with public assistance as primary source of support at closure and at follow-up (iii) Percent noncompetitively employed 26 closures retaining closure skills at follow-up	6. To insure that clients closed rehabilitated retain the benefits obtained from the rehabilitation process (i) Percent of rehabilitated clients still employed at time of follow-up, specifying one year, two years, or three years after closure (ii) Percent with earnings at follow-up, mean earnings at follow-up (iii) Percent increase or decrease of earnings at follow-up (iv) Percent of rehabilitated clients (status 26) unemployed at follow-up for: less than one month, one to three months, four to six months, seven to 12 months, more than 12 months
8. Clients shall be satisfied with the VR program, and rehabilitated clients shall appraise VR services as useful in achieving and maintaining their vocational objectives (i) Percent closed clients satisfied with overall VR experience (ii) Percent closed clients satisfied with: information provided, counselor promptness, physical restoration, job training services, placement services (iii) Percent 26 closures judging services received as useful in obtaining their job/homemaker situation or in current performance	8. Clients shall be satisfied with the VR program, and rehabilitated clients shall appraise VR services as useful in achieving and maintaining their vocational objectives (i) Percent closed clients satisfied with overall VR experience (ii) Percent closed clients satisifed with specific aspects of VR (iii) Percent 26 closures judging services received to have been useful in obtaining their job/homemaker situation (iv) Percent 26 closures judging services to be useful in current performance on the job/homemaker situation	9. To insure that the client is satisifed with the vocational rehabilitation services as developed with the counselor (i) Percent of clients rehabilitated throughout the fiscal year (status 26) and not rehabilitated (statuses 28 plus 30) throughout the fiscal year who express satisfaction with the following, specifying one year, two years, or three years: (a) counselor's willingness to listen to client's ideas and suggestions in developing the IWRP (b) adequacy of information provided by counselor to clients for understanding their disability (c) promptness in the delivery of services (d) kind of training received (e) benefits of training received (f) assistance in seeking job and final employment (g) results of physical restoration services (iv) Percentage of clients contacted during the follow-up period who stated they would recommend vocational rehabilitation to a disabled friend

Table 7 (continued)

Procedural Standards*

1981 Revised BPA Standards	1976-1978 BPA Standards	1975 General Standards for Evaluation
9. Information collected on clients by the R-300 and all data reporting systems used by RSA shall be valid, reliable, accurate, and complete	9. Information collected on clients by the R-300 and all data reporting systems used by RSA shall be valid, reliable, accurage, and complete	
10. Eligibility decisions shall be based on accurate and sufficient diagnostic information, and VR shall continually review and evaluate eligibility decisions to insure that decisions are being made in accordance with laws and regulations	10. Eligibility decisions shall be based on accurate and sufficient diagnostic information, and VR shall continually review and evaluate eligibility decisions to insure that decisions are being made in accordance with laws and regulations	
11. VR shall insure that eligibility decisions and client movement through the VR process occur in a timely manner appropriate to the needs and capabilities of the clients	11. VR shall insure that eligibility decisions and client movement through the VR process occur in a timely manner appropriate to the needs and capabilities of the clients	3. To insure that undue delays are avoided in providing clients with VR services (i) Average time from combined referral-applicant statuses (statuses 00-02) to closed not accepted (status 08) (ii) Average time in extended evaluation (status 06) for cases closed not accepted (status 08) (iii) Average time from combined referral-applicant statuses (statuses 00-02) to accepted statuses for cases closed rehabilitated (status 26) and closed not rehabilitated (statuses 28-30) during the fiscal year (iv) Average time in extended evaluation (status 06) for cases closed rehabilitated (status 26) and closed not rehabilitated (statuses 28 and 30) during the fiscal year (v) Average time from accepted case statuses (statuses 10-24) to closed rehabilitated (status 26) (vi) Average time in accepted case statuses (statuses 10-24) to closed not rehabilitated after rehabilitation program was initiated (status 28) (vii) Average time in accepted case statuses (statuses 10-24) to closed not rehabilitated before the rehabilitation program was initiated (status 30)
12. VR shall provide an individualized Written Rehabilitation Program for each applicable client and VR and the client shall be accountable to each other for complying with this agreement	12. VR shall provide an individualized Written Rehabilitation Program for each applicable client and VR and the client shall be accountable to each other for complying with this agreement	

*Procedural Standards are not measured with data elements, but through case review and use of designed instruments. For more information, please see BPA's Report on the Pretest of the Revised Vocational Rehabilitation Program Standards, Volume 2, Draft, 16 July 1981.

Table 7 (continued)

Performance Standards (continued)

1981 Revised BPA Standards	1976-1978 BPA Standards	1975 General Standards for Evaluation
		5. To insure that manageable-sized caseloads are maintained (i) Number of caseload carrying counselor man years (ii) Number of authorized and funded full-time caseload carrying counselor positions (iii) Number and percent of rehabilitation counselor turnover, i.e., hiring rate and separation rate (iv) Average size of caseloads as of September 30 per number of authorized and funded caseload carrying counselor positions (v) Describe the process, if any, employed by the state for each of the following functions: caseload management; caseload monitoring; caseload review 7. To insure that the need for post-employment services is satisfied (i) Percent of rehabilitated clients in the previous fiscal year (status 26) receiving post-employment (post-closure services during the 12 months following closure (ii) Percent receiving the following types of post-employment services of the total receiving post-employment services: (a) diagnostic and evaluation (b) restoration (physical and mental) (c) training (d) guidance and counseling only (e) maintenance (f) transportation (g) other 8. To insure that agencies are consistenly identifying reasons why clients are not successfully rehabilitated (i) Percent of status 08,28, and 30 closures by the following reasons: (a) unable to locate or unable to contact or moved (b) handicap too severe or unfavorable medical prognosis (c) refused services or further services (d) death (e) client institutionalized (f) transferred to another agency (g) failure to cooperate (h) no disabling condition (08 closure only) (i) no vocational handicap (08 closure only) (j) other (ii) Cases closed not rehabilitated (statuses 28 plus 30) as a percentage of the total accepted cases closed (statuses 26 plus 28 plus 30)

Table 7 (continued)

Procedural Standards (continued)

1981 Revised BPA Standards	1976-1978 BPA Standards	1975 General Standards for Evaluation
13. Counselors shall make an effort to set realistic goals for clients. Comprehensive consideration must be given to all factors in developing appropriate vocational goals such that there is a maximum of correspondence between goals and outcomes: competitive goals should have competitive outcomes and non-competitive goals should have non-competitive outcomes.		2. To insure that rehabilitated clients are placed in gainful employment suitable to their capabilities (vi) Those who received training related to the job family in which they were placed (as identified by the first digit of the Dictionary of Occupational Titles code) as a percentage of the total number who received training

- The first standard addresses coverage, or the extent to which the vocational rehabilitation program is serving the eligible target population. The need to ensure accessibility of services to all the eligible disabled is of paramount importance to RSA and the states. The first data element -- clients served per 100,000 population -- provides a proxy measure of coverage of eligible population. The second measure -- percent of clients served who are severely disabled -- measures achievement of the priority legislated for the severely disabled by Congress.

- The second standard addresses directly the cost-effectiveness of the state program's overall use of resources, and the benefit-cost returns from investment in vocational rehabilitation services. The first two data elements measure the cost of achieving desirable outcomes -- first, expenditures per competitively employed closures, and second the expenditure per 26 closure. The focus on competitively employed closures recognizes the policy decision in RSA that such a closure is the highest priority in the program for clients. The second two data elements focus on the two accepted measures of benefit-cost returns -- the benefit-cost ratio and discounted present value. The benefit-cost model developed at Berkeley and used over the years by RSA and many state agencies for reports to Congress and state legislatures, and which was favorably reviewed by many independent specialists, is the model used to generate these summary data elements. The model is to be expanded by incorporation of subsystems being developed by the Texas Institute for Rehabilitation Research (TIRR) for taking the less monetary benefits of increased functional capacity and other aspects of independent living into account.

- The third standard monitors the quality of service outcomes being achieved by the program and uses the traditional data elements of per cent of closures which are successful (the 26 closure) and annual change in the number of 26 closures. These data elements have a long history of use and acceptance in state programs as measures of how many clients VR is successfully serving.

- The fourth standard focuses on whether rehabilitated clients evidence increased economic independence, recognizing that VR's most basic purpose is to assist disabled persons in finding gainful employment that will permit their economic self-sufficiency. Two data elements compare the wages achieved by rehabilitants to national standards (the minimum wage) and to state norms (earnings of employees in the state). These again are measures of the quality of service outcomes.

- The fifth standard focuses on competitive and non-competitive employment outcomes in order to assess the quality of closures obtained by VR agencies. The first two data elements measure the percent of 26 closures who achieve competitive employment, and among these the percent employed at or above the national standards of the minimum wage. The last data element recognizes that competitive employment may not be the appropriate placement for all clients, but that it still is important that rehabilitation services achieve improvements in gainful activity for those clients for whom employment is not the goal. For non-competitive closures, then, a data element measures the percent showing improvements in function and life status. The instrumentation for determining such improvements is being developed by others for inclusion in the MIS, and will be pretested in subsequent years by RSA.

- The sixth standard is directed at measuring client change before and after service. The 1978 standards recommended probing causal relationships between services and outcomes and judging how much of the gain exhibited by clients is really attributable to the services they receive. This was because both clients of VR and non-clients may show, over the same time period, increased earnings, increased levels of skills, and other vocational gains. After pretesting a range of measures, including the use of comparison groups of unsuccessful closures, data elements are recommended which simply measure "before-after" changes in earnings and (when MIS data becomes available) in functional capability. These measures are highly limited for inputing causality to VR service impact but they provide some control for the client's capability prior to services. BPA has recommended that the mandate for establishing causality be fulfilled through periodic controlled research studies of clients on a national level as part of supportive evaluation undertaken by RSA. The complexity of such research makes it infeasible for completion by state programs as part of their routine, ongoing evaluation activity. Thus the focus of the standard becomes one of measuring client change, rather than establishing that the clients' change is due to VR services.

- The seventh standard again monitors quality of service outcome and overall program effectiveness, and focuses on the retention of client benefits from VR services over time. The data elements draw on follow-up data after case closure to monitor retention of earnings by individual 26 closures, the percent of 26 closures who remain non-dependent on public assistance as their primary source of support, and the percent of non-competitively employed 26 closures who retain their enhanced independent living and functional skills.
- The eighth and last performance standard monitors the consumer's appraisal of services -- client satisfaction with VR services. Two data elements include measures of client satisfaction with overall services and various aspects of services (e.g., counselor promptness, the quality of placement services). The third data element moves beyond satisfaction to monitor the client's judgement that services received were useful in their obtaining their job or homemaking situation.

Abandoned in the proposed standards revision are those elements in the existing standards which focused on post-employment services, manageable-sized caseloads, the reasons for unsuccessful rehabilitation, and the length in time of the service process. The proposed new performance standards monitor outcomes and cost-effectiveness, not service process.

In addition to the performance standards, the revised proposed standards include five procedural standards that do focus attention on critical process areas and on data validity. Assessment of performance on these standards is to occur using instrumentation and procedures (modifications of the Case Review Schedule developed by the San Diego State RCEP IX) developed for gathering uniform data from state agencies. The procedural standards focus on the validity and completeness of R-300 data, the need for eligibility decisions to be based on adequate diagnostic data and to conform to federal laws and regulation, the desirability that eligibility decisions and movement through the VR process be completed in a timely manner appropriate to the needs of clients, compliance with the requirement for the Individualized Written Rehabilitation Program, and the need for realistic goal-setting for clients and adherence to the policy of seeking competitive employment outcomes when feasible.

Having completed the development of the VR Program Standards, the next task is to provide a system for collecting and reporting standards data so that it can be used by program managers within RSA and within state agencies. Fortunately, development of such a system will not have to begin from scratch, thanks to an RSA system development effort currently underway. Specifically, RSA has contracted for the development of a Management Information System (MIS), which will include the standards information and which will provide program managers with the capability to measure and analyze performance on the standards. We next discuss the role the standards will play in the MIS.

THE REVISED STANDARDS AS THE CORE OF A NATIONAL MIS

In 1978, RSA entered into contract with Abt Associates to design the MIS. This system was to provide RSA with the capability to produce -- in a timely and useful way -- the information needed for RSA's monitoring, planning, and support functions. To guide and support this contract, RSA established an internal MIS Work Group[1] to identify the data requirements for the system. The Work Group identified coverage, efficiency, impact, and compliance as the key areas on which information was needed. In reviewing the relationship of the new standards to RSA's information needs, the Work Group recommended that the standards and their data elements form the core basis for information on the program's level of coverage, efficiency, and impact. Other program and exogenous data, and program compliance procedures were added as supporting MIS elements needed by RSA and its component state agencies.[2] Particular design problems -- such as the recommendations for changes in client data items, for formatting of data elements, and for ensuring timeliness of data reporting -- were also addressed in this design phase. For example, some VR agency directors are worried that sole use of placement outcome measures as performance indicators might weaken the agencies' ability to demonstrate worth, vis-a-vis other social programs. From their perspective, the program would "have a stronger hand" if the MIS included a broader set of measures showing "intermediate achievements" by clients in terms of gains in life status or functional abilities. This concern has arisen due to the 1973 Act's mandate to serve the severely disabled, and from the emphasis on Independent Living in the 1978 Act. In response to this concern, the Work Group recommended that a pretest be conducted to determine the feasibility of including measures of non-vocational benefits (e.g., self-care, housing situation, mobility) within the overall MIS. This pretest will occur in FY 1982 and, if successful, will result in MIS elements which more fully captures the information needs of program managers.

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[1] Comprehensive Management Information System for the State/Federal Vocational Rehabilitation Program, Final Phase I Report/Executive Summary, November 1980. Abt Associates, Cambridge, Massachusetts, November 1980.

[2] Cole, Charles B., et. al., Information Needs Assessment, Abt Associates, Cambridge, Massachusetts, September 24, 1980 (Revised).

The debate surrounding the issue of non-vocational benefits presages a possible change in the basic philosophy of vocational rehabilitation. If the leaders of the program decide in fact to pursue this direction in their future legislation and regulations, it will call for additional goals reflected in the standards and their data elements. For the time being, however, the standards express the explicit aims of the program. And, while the MIS designers are experimenting with the implications of these newer thoughts related to credit for performance, the MIS design itself still centers on the traditional emphasis expressed in the revised VR Program Standards.

CONCLUSION

The rehabilitation system has traditionally benefitted from its ability to describe its achievement in terms of a single outcome measure, the "26". However, this measure does not differentiate between outcomes of different quality, or allow for more difficult clients. Consequently, in response to a Congressional directive to develop performance measures, RSA has developed a system of standards which seeks to measure performance over several program dimensions. In response, a system was hastily developed, and subsequent developmental efforts have resulted in a new system now ready for implementation.

This developmental effort has taken several years and involved state administrators, RSA officials, and other rehabilitation experts in a careful examination of the goals of the program and the processes of rehabilitation. The resulting measures stress achievement of competitive employment and other quality outcomes, cost-effectiveness, and coverage; and for the most part relegate process and input concerns to case review and other compliance procedures, and to supportive analyses.

The standards have undergone extensive development and refinement since their genesis in the 1973 Act. However, a major task remains in terms of translating the concept and theory of standards into a functional system which fulfills the goals originally motivating RSA's standards development efforts: to provide a vehicle by which RSA and state agencies could assess and analyze performance, and direct the program towards improved performance. Until recently, efforts in the development of standards have focused on identifying the appropriate aspects of performance needing measurement (i.e., on choosing standards), and on identifying data elements to address these various performance aspects. Only recently have attempts been made to illustrate how the information provided by the standards can be used by program managers. The 1978 Amendments to the 1973 Act deleted the requirement for the evaluation standards. RSA, however, has continued to support standards development as an evaluation activity. It is quite clear, however, -- from the experiences in state agencies in the first round of standards development and in the pretest -- that without some demonstration of the tie between the standards and anything that matters to administrators and counselors in their day-to-day work, the standards will form the basis for a system of descriptive statistics and nothing more. RSA has had, and continues to have, better program information than many social programs; the reporting and analysis of the standards adds to that capacity. The real test, however, is whether the standards contribute to performance. Through the MIS, the information requirements of the standards can be handled more efficiently than is possible in current reporting. But only through management's use of the standards -- that is, through identification of performance problems and analysis leading to corrective action -- will the intended program guidance and program improvements come to be.

As part of BPA's activities for the standards pretest, we developed a "paradigm" (i.e., model) for management use of the standards system. In the next section we turn to the topic of program managers' use of data in guiding their programs. First, we discuss our perceptions of the current "state-of-the-art": how and to what extent managers use program data in general, and standards data in particular. (These impressions were garnered from interviews with administrative personnel in the six MEU's, who were visited on-site during the pretest.) Following this, we next provide a summary description of our proposed paradigm. We hope that, with this summary, the potential benefits deriving from a functioning, effective standards system will be made clear.

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III. THE USE OF PROGRAM STANDARDS INFORMATION BY VR PROGRAM MANAGEMENT PERSONNEL: IMPRESSIONS ON THE CURRENT STATE OF THE ART, AND A PROPOSED PLAN FOR IMPROVED UTILIZATION OF STANDARDS DATA

A standards system in VR should facilitate evaluation and management of the program, with the goal of improving program performance. However, as was discussed in the previous chapter, investigations by BPA during the 1976-1978 standards revision activities indicated that, at least in the early years, the standards had failed to impact on agency management or, by extension, on agency performance. During the pretest, BPA has developed a model for use of the complete standards by VR program managers to improve agencies' performance. This model, which is presented in detail in the Analytic Paradigm for the VR Program Standards,[1] illustrates the "cyclical" nature BPA recommends for operation of the complete standards system. Thus it shows how the standards data will be reported, analyzed by evaluation and management staff, and "fed back" -- in the form of policy, procedural, and/or programmatic changes for the next operating cycle -- to improve program performance.

This section addresses the general issue of how program performance data -- from the standards and from other reporting sources -- is currently used by management personnel in the VR field to perform their management functions. First, we present an "update" on the current uses of program data by state agency administrative staff. As part of our pretest activities, BPA staff spoke with top-level administrators in each of the six Model Evaluation Unit agencies (MEU's). We explored whether the current system of nine program standards had gained in importance as a management tool, since our last visits to state agencies in 1976. As well, we wanted to get the administrators' perceptions on how program data is and could be used for management purposes, and on how a revised, overall program standards system should be designed to assure maximum impact on agency performance.

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[1] Berkeley Planning Associates, November, 1981.

Many issues and recommendations were put forth during these discussions, and BPA has used this professional input in our design of a model for operation of the standards system.

After presenting our findings from the discussions with administrative staff, we present a brief summary of the various components of our overall system design. With this, we hope the reader will gain a general understanding of how the revised standards system will operate and be used to enhance the program's capacity for improved performance.

USING RSA PERFORMANCE STANDARDS IN PROGRAM MANAGEMENT: THE CURRENT STATE OF THE ART

This discussion presents a synthesis of the comments received from top-level state agency administrative staff regarding the current and revised standards. Our interviews in the six MEU state agencies touched on such topics as: current uses of standards data, current uses of data in managing programs, potential utility of the revised standards system, design issues for a performance standards system, and feasibility of standards implementation. These interviews took place in November and December 1980. The consensus was that the revised standards system could be useful for both internal management and "external relations," if certain design criteria are met.

We found little change in terms of the importance attached by administrators to the current nine standards. In general, administrators continued to view the standards activities primarily as a reporting requirement and not as a management tool. Many of the individual data elements were considered important by administrators. However, delay in data reporting from RSA greatly reduced the usefulness of the standards reports for day-to-day management.[1]

Given their experiences, it was not surprising that our administrator respondents reacted cautiously to the concept of new revisions to the federal evaluation set of standards. However, BPA's specific standards and data element recommendations were received quite positively by the administrative staff. Each of the six MEU state agencies already use many of the proposed data elements in their existing management information systems. The most commonly used data elements, according to the administrative staff, include:

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[1] Our interviews took place in December, 1980, before the distribution of the 1979 Standards Reports. The 1979 data was available in the summer of 1981 -- the delay thus has been reduced to 1-1/2 years.

- percent of closures rehabilitated (% 26);
- expenditures per 26 closure;
- percent of 26 closures obtaining competitive employment; and
- percent of 26 closures earning the minimum wage.

In addition, most of the other standards data elements are used in at least one of the agencies we visited, for purposes of monitoring counselor and agency performance. Further, for the most part, MEU administrative staff felt that it would be good to have access to the information provided by each of the data elements proposed in the revised standards. The only data elements which were seen as problematic were:

- the benefit-cost ratio and the total net benefit data elements (Standard 2). The major problem perceived here is that the models appear too complex to be of use in managing agency operations. However, the data elements are seen as powerful selling points for the agency, presuming the agency "succeeds" in terms of the two measures.
- the causality data elements (standard 6). The major objection raised here concerned the validity of control groups used to determine causality. The preference (and practice) of each of the state agencies is to determine causality on a client-by-client basis; that is, by conducting case reviews, with a special eye towards quality and appropriateness of services.
- the satisfaction data elements (standard 8). These data elements, while seen as useful for public relations, are not seen as useful for managing the agency, primarily because of the subjectivity of client appraisals.

The six state agencies seem to vary in the extent to which administrative personnel use data in managing their programs. This is partly due to differences in their data-processing resources (e.g., hardware, programmers). However, even in those agencies with sophisticated data processing capabilities, it appears that program managers have yet to make full use of available data. To be sure, data on clients, services, and outcomes are collected and reported to program managers. Also, as we alluded above, data is used for monitoring counselor performance and in establishing performance goals for counselors. However, program data are rarely used in analyzing and explaining performance, good or poor. Given this, it would seem logical to assume that program data is not used to manage the program or to inform program change. In fact, according to both administrative and evaluation staff, programs are managed in a reactive fashion rather than in a prospective fashion. In particular, top management's prime concern is with reacting to external actors rather than focussing on internal management. According to evaluation staff, the majority of "special analyses" (i.e., one-time, non-recurring studies) are conducted in reaction to queries or complaints from external actors (e.g., legislatures, consumers). In contrast, we found little evidence of such internal management techniques as differential, performance-based resource allocation systems for districts or counselors, or of special studies intended to explain and improve performance.

During our interviews, however, program management staff expressed interest in having access to a data analysis system useful for managing their programs. They saw three primary benefits from such a system. First, as might be expected in the current fiscal climate, administrators felt than an effective data analysis system could help to improve the cost-effectiveness of services. Given adequate analysis resources, the standards data elements are seen as one vehicle for identifying and investigating problem performance, and for acting on that information to improve cost-effectiveness: through funds reallocation, special program development, program and procedural changes, technical assistance to field staff, and so on. Second, administrative staff saw the revised standards as useful for selling the program to funding bodies and consumers, with a special focus on measures of cost-effectiveness. This benefit will be enhanced, of course, to the extent that the agency achieves exemplary performance. However, according to our respondents, some level of benefit is obtained simply by having data where none existed before (in a useable form). Finally, administrative staff expressed the idea that, in general, if designed correctly the standards could lead to better decision-making by administrative staff; that is, to better informed and more effective program management.

Although our administrative staff respondents perceived some potential benefits from a data analysis system based on the standards, their support was qualified by two design concerns. First, to be useful, the information must be timely; that is, performance should be reported on a frequent basis. Monthly or quarterly reporting periods were considered ideal, with six-month periods being termed the "absolute longest" period acceptable. Beyond this time-frame,administrators felt the standards data would lose its usefulness for management. The current practice of establishing performance leads based on comparison of last year's national statistics has severely limited the use of performance data for management purposes. Analysis of closure and case data on a treatment basis should be a part of the design. Second, if the information is to have an impact on management, it must be accompanied by a system for analyzing the data at the micro-level; that is, in terms of districts, counselor, and clients, as well as overall state performance. Without such a system, program managers would obtain little more from the RSA system than they already have: a data system for reporting state performance, but lacking a mechanism for investigating causes of unacceptable performance. This concern is answered below, where we discuss methods for conducting analysis (termed "supportive evaluation") for investigating and correcting problem performance, using a data-based decision support system for state agencies.

Our discussions also touched on the issue of RSA's use of the standards. Several ideas emerged from these discussions. Our administrative respondents felt that RSA could conceivably use the standards as an incentive to improved state agency performance. However, for this to happen, the administrators felt that certain design criteria must be met. First, RSA must actually provide some type of incentive mechanism which will make the standards a salient factor in program managers' strategies. Maximum incentive impact would be achieved by linking RSA funding allocations to the agency's standards performance, according to administrators. Without such an incentive, the standards remain just another reporting requirement. However, the staff were quick to note that their preference is for positive incentives (i.e., rewards of supplemental funding) given for achieving improved performance, rather than for punitive sanctions (i.e., funding cuts) due to failure to improve. If such incentives were established, states would have in interest in internalizing the measures for their own staff performance assessments.

Beyond the incentive issue, the staff noted other concerns they hoped would be addressed prior to standards implementation, particularly if RSA intends to make comparisons across states when evaluating agency performance. To summarize, the concerns are:

- Any measure chosen as a data element must address a valid program goal, and agencies must be capable of influencing performance on those measures.
- RSA must establish consistent definitions for use by all agencies when reporting performance. Of particular concern are the definitions used to classify costs, expenditures, similar benefits, and closure types.
- RSA must develop some method for prioritizing the conflicting goals represented by various standards data elements. For example, the standards mandate state agencies to maximize coverage (e.g., number served, percent served who are severely disabled) while at the same time mandating maximum impact (e.g. percent rehabilitated and competitively employed). These conflicts were seen as the major problem needing resolution, before use of an incentive system.

Finally, we discussed the feasibility of obtaining acceptance of the standards by field service personnel. In general, our administrative respondents felt that such a system could be accepted as a monitoring mechanism by field staff, although "it would take some time" and "of course counselors will complain at first". States with counselor unions might experience greater difficulty in instituting such a system. Also, our respondents cautioned that, to avoid merely a "numbers game", the standards would have to: (1) reconcile conflicting mandates (e.g. through priorities on, or weighting of data elements); and (2) appear salient to program managers. This second condition will be facilitated if state agencies perceive that an incentive exists. However, even in the absence of an RSA incentive, program managers still might implement a standards-type evaluation system, provided that a system exists for using the data at a micro level.

To summarize, overall, the administrative personnel we interviewed expressed positive, if guarded comments on the revised standards. State agencies already use many of the proposed data elements in their management or monitoring systems, although our impression is that program managers have yet to make full use even of the data they have. Current use tends to be reactive in nature: information dissemination to external actors, rather than information utilized internally for program change and improvement. However, in the current fiscal climate, administrators' interest in such data uses seems to be heightened. Much concern exists over whether RSA would use the standards to compare states and, if so, whether RSA will ensure consistent definitions and reporting procedures for all agencies. Finally, given time, they felt that the standards would be accepted by counselors and other field personnel.

A MODEL FOR MANAGEMENT USE OF THE REVISED STANDARDS DATA

When fully implemented, the standards design will comprise a useful system for VR program evaluation and management. So that the reader may understand how the standards, data elements, and data collection forms discussed herein will fit into this sytem in practice, we would like first to briefly discuss the various components of the total system design, and to illustrate how these components fit together into one integrated system for using the standards information. A detailed presentation of the system appears in our report on the analytic paradigm for the program standards. Here we sketch out the overall context, so that the larger picture will be evident.

The components of the Program Standards System are as follows:

- a specification of the goals and functions of the VR program;
- a set of standards data elements to measure the program's performance and procedural goals;
- a process for setting performance expectations on these data elements;
- a model for decision-support systems which allows managers to use program data to help investigate possible causes of problematic performance; and
- a reporting system for the standards.

The Goals and Functions of the VR Program

RSA has issued a variety of goals over the course of its existence.

These goals have appeared in such publications as the RSA Forward Plan, short- and long-range plans, Information Memoranda, and so on. The goals have addressed the full range of activities, concerns, and foci of the rehabilitation field, including:

- facilities grants and management;
- general advocacy and policy-development activities;
- similar benefits and inter-agency cooperation;
- rehabilitation research;
- independent living;
- management capabilities; and, most relevant for our purposes,
- service delivery, outcomes, and impact.

While RSA has not lacked for goal statements, it has recently received criticism concerning the effectiveness of its system for implementing its own goals.[1] Some of the specific criticisms allege that RSA has:

- failed to operationalize its goals (i.e., specify them in measurable terms); and
- failed to have a system for transmitting performance information to the appropriate program managers for use in decision making.

In response to these criticism, in 1980, the acting RSA commissioner issued the following set of broad goals for the agency:[2]

- insuring compliance with the legislation, and
- encouraging and supporting State agency efforts to improve the quality and cost-effectiveness of the program according to nationally defined priorities.

These two statements are obviously quite broad, and require some elucidation as to their meaning in the context of the basic VR program. In the Analytic Paradigm report we discuss how these goals translate into more specific subgoals (i.e., performance objectives) relevant to the basic VR program. In particular, we illustrate how the revised performance and procedural standards relate to the program's goals, and how the standards data elements provide operational measures of the program's success in achieving its goals.

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[1] A description of RSA's management and information processes appears in the Evaluability Assessment of the Role of the Rehabilitation Services Administration in Managing the Basic VR Program by Urban Systems Research and Engineering, Inc. (1980).

[2] RSA Memo, "Development of the RSA FY81 Operational Plan," August 29, 1980.

Set of Data Elements

The set of data elements used to measure the performance goals are presented elsewhere in this report, along with discussions of their validity and reliability. Here it should be noted what these data elements do and do not measure. Specifically, the program standards measure a state's:

- level of coverage, i.e., the proportion of the eligible population being served;
- impact of its service to clients;
- efficiency in serving clients; and
- attention to key procedures.

What are not included are measures of:

- inputs, e.g. what kind of VR counselors are hired, what kinds of services are prescribed;
- systems impacts, e.g. on attitudes of employees toward the disabled, on referral networks in the community; and
- financial operations, e.g. budgetary systems.

Thus, the program standards data elements are mostly oriented to measuring the performance of VR agencies in helping individual clients; they leave decisions of how to achieve these performance goals to individual agencies and VR counselors.

Process for Setting Performance Expectations

What is very different about this standards system is that it is a prospective system designed to change the performance of VR agencies through prior specification of performance expectations, rather than a retrospective system that just reports on past performance as compared to other states. There are many options for setting these performance expectations, including:

- using average performance of all agencies, or some subset of agencies (e.g., in the region);

- specifying comparable agencies or sister agencies with exemplary performance and using their performance as an expectation;
- using norms of performance set by Congress, RSA, CSAVR, etc.;
- setting minimum (rather than maximum) kinds of performance the same way;
- drawing on a particular agency's past performance to set limits on future performance; and
- negotiating with a particular state agency to set a realistic expectation, perhaps through the Regional Officer.

The existing standards draw on central tendency statistics to judge whether a state program performed adequately in the past year. This approach implicitly assumes that performance should have some kind of normal distribution with some states always being poor and other states being extraordinarily successful. This assumption is clearly unfounded, however. It could well be that all states have an acceptable performance, or that all states are performing poorly in terms of some standards. The central tendency statistical approach, while descriptive, does not examine the level of typical performance with what is reasonable or desirable, but instead automatically generates "failures" and "successes" among state programs. The more that state agencies are fairly similar in performance in terms of some data element, the more arbitrary the central tendency approach becomes. Finally, because the central tendency approach requires the data for all state programs to be available so that the distribution could be calculated, performance "norms" for state programs are dependent on the timeliness of the last state's submission of data. This greatly delayed the availability of the evaluation data and made use of the standards infeasible for the ongoing monitoring of the program performance during the year. Even with improved measures of central tendency, these criticism hold true. We recommend a performance level procedure where the central tendency approach becomes merely one of several methods which can be used to set performance goals, rather than being the sole method. Further, we recommend an additional, and even more significant change in the process by which performance goals are set: rather than continuing with the post-hoc system based on national norms, we recommend placing responsibility within each state to set its own objectives for the level of performance to be achieved during an upcoming fiscal year, for each data element. When setting performance objectives, state agencies might be anticipated to look at their past performance, at the levels of performance being achieved by other state programs that agency staff view as comparable, at the performance nation-wide, and at pending changes in state economic conditions, policies on client and service mix, and other unique state factors which might affect performance. RSA might provide technical assistance to the state agency in identifying appropriate levels, and participate in the state's setting of its goals, but the lead and principal responsibility in setting objectives for performance for the coming fiscal year would be with the state agency. The new system recognizes that state agencies best understand the needs of their programs, that there are appropriate differences among state agencies in policy priorities, and that it is the state agency which must accept that there are performance problems or shortfalls if needed improvements are to be identified and implemented.

A particular advantage of this reliance on state agencies to set performance level objectives is that it permits the standards system to be used for monitoring and assessing the ongoing program. State agencies can use their in-house data systems to monitor individual data items on a monthly or quarterly basis, and to see if the program is on target in terms of moving toward annual goals or sustaining acceptable rates of quality closures. Thus, the standards evaluation system can provide much more immediate feedback to program management to lead to improvements in performance. The existing central tendency-based system results in feedback years after the program conduct giving rise to performance problems, and is useful principally in spotting overall problems needing the attention of long-range planning and systems improvement. The proposed standards system can be used much more easily for ongoing program management and improvement.

The Reporting System

The role of the reporting system in the standards system is to provide the vehicle for bringing together the various sources of data so that a particular agency's attainment for a specific time period can be compared to its objectives for the period. In addition, the reporting system must provide program managers with the capability to investigate problematic performance, as we shall describe subsequently. To do these two things, a reporting system has been designed to:

- specify how data collection for the standards is to be performed; when new data collection is needed, e.g., on earnings at follow-up.
- bring together the various types of data from the various sources, e.g., from the MIS, from the financial reporting systems;
- keep track of past performance as well as current expectations;
- present the findings in an easy to use, easy to understand way, without unwieldy reports, emphasizing graphical presentations as well as plain numbers; and
- make sure that the reporting of results occurs in a timely fashion, so that future performance can be affected -- our recommendation is that reporting be done quarterly.

The new data collection for the standards system is described later in this report, as are the various sources of data for the standards. The procedures and sources have been integrated with the Management Information System (MIS) being developed separately by RSA and Abt Associates. Indeed, the refined standards are central to the MIS since they focus on the program outcomes and achievement of overall program goals. The MIS, while obviously serving many additional objectives as well, will provide information readily to state agencies that would show performance in terms of the standards and also be usable in identifying how to improve performance. However, even if the MIS were to be unexpectedly delayed in implementation, the standards system is compatible with the kinds of R-300 data compilations routinely generated even now in many state agencies' internal information systems. Thus, the evaluation standards system could be adapted by individual state agencies for their use, independently of RSA's implementation of the MIS.

Supportive Evaluation System: Decision Support

Out of the standards reporting system will come the clear indication that some agencies on some data elements will not have met their objectives for level of attainment. The standards system does not stop there, however, but instead moves to investigate the reasons for problematic attainment and to develop corrective actions as part of a data based decision support system. The elaboration of this system has been a major effort of the pretest and refinement effort. Chapter VI includes a discussion and example of this system. The purpose of this system is to close the gap between reporting on the standards and actions based on the standards. Thus, the system must provide timely results, utilize existing information (such as the standards system, the MIS) as much as possible, be understandable to the key actors (not just the evaluation research staff), and be flexible in dealing with new problems. When in place, the decision support system will:

- provide an ability to pinpoint causes for problems in attainment; and
- identify strategies leading to enhanced attainment.

The decision model for the program standards system specifies how the information obtained from the reporting system can be translated into actions by various levels of program management. One might mistakenly assume that, since the standards have been developed by RSA, the standards information system is of use only to RSA. To speak plainly, nothing could be further from the truth. First, since the basic VR program is a state-federal partnership, the goals set out for the federal agency apply to the rehabilitation programs operated by states. Second, although we anticipate that RSA will initially take lead responsibility for analyses and decision-making on the basis of the standards system, it is neither intended nor desired that states be frozen out of the processes embodied within the standards system, nor that the system should have little relevance or use by states in their management processes. In fact, as we have noted in this and earlier chapters, we can expect little impact on state agency performance from the standards if state managers perceive the standards system as irrelevant to their management functions. By developing a decision model for use by state managers, the desired link between information and action is facilitated. As discussed earlier, the need for an effective paradigm for using the standards information in managing the VR program was made very clear in BPA's visits to states during the early phase of standards development. The problem, it appeared, was that implementation of the standards did not include a paradigm for their use. In particular, no paradigm was developed which contained all the elements necessary to link performance on the standards to improved manageability.

Thus, while the standards have been used for descriptive reports, they have not in general served as an incentive or aid to improved performance, particularly within state agencies.

Our purpose in the analytic paradigm is to design a comprehensive system for analyzing information obtained from the standards system, and for identifying areas for action to encourage program improvement.

The new standards evaluation system promises to solve a number of long-standing rehabilitation program needs: it provides an evaluation framework for monitoring performance based on program outcomes; it places the leadership role for deciding how to improve performance with the state agency; it provides a workable decision support system linked with an agency MIS and structured to enhance use by management to improve the program; it provides a clear but limited role for RSA as the source of technical assistance to the stages, the developer of basic systems technology for helping states in evaluation, and the periodic conduct of special evaluation studies that would be infeasible or inefficiently mounted by a single state.

The analytic paradigm represents the broader context into which the Program Standards and data elements will fit.[1] We turn next to the detailed discussions of the Performance Standards and data elements.

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[1] The complete system design is presented in our separate Analytic Paradigm for the Revised VR Program Standards, available from RSA.

IV. THE EIGHT PROGRAM PERFORMANCE STANDARDS

INTRODUCTION

This section discusses each of the eight performance standards designed to measure the achievement of a desired outcome or goal of vocational rehabilitation. The standards address several pivotal issues of VR. These are primarily:

- The extent to which VR serves the target population; and
- The value of VR services, both to society and to the disabled client, including
  - -- maximization of 26 closures, increased economic independence, and retention of earnings or improvement in gainful activity;
  - -- client satisfaction;
  - -- demonstration of a causal relationship between VR services and client outcomes; and
  - -- demonstration of the cost-benefit and cost-effectiveness of VR services.

In this section, each of the eight standards is presented in detail. The discussion is organized into eight sub-sections (one for each standard) and includes the rationale for each standard and data element, the formulas for each data element, and the sources from which data will be collected. The comments from state agencies and Model Evaluation Units regarding each standard and data element are summarized and discussed. Following our response to reviewers' comments, we present our preliminary recommendations for each standard and data element. Finally, at the end of each of the eight sub-sections we present a brief analysis of the data element statistics collected from each of the six states participating in the pretest.

STANDARD 1: VOCATIONAL REHABILITATION SHALL SERVE THE MAXIMUM PROPORTION OF THE POTENTIALLY ELIGIBLE TARGET POPULATION, SUBJECT TO THE LEVEL OF FEDERAL PROGRAM FUNDING AND PRIORITIES AMONG CLIENTS.

Data Elements: (i) Comparison of caseload served to expenditures

(ii) Clients served per 100,000 population

This standard addresses coverage, or the extent to which the vocational rehabilitation program is serving the eligible target population. The need to ensure accessibility of services to all the eligible disabled is of paramount importance to RSA and the states. Given this standard's focus, we feel that it fits in well with the cost-effectiveness goal. On its face, the standard is concerned with the "effectiveness" aspect of the cost-effectiveness questions: increased service coverage of the eligible population is one indication of increased effectiveness on the part of a state agency. In fact, coverage represents one of the most basic aspects of a program's effectiveness. Alone, this standard ignores considerations of the quality of the coverage (i.e., the appropriateness and utility of the program's activities in the clients' behalf, and the clients' service outcomes). However, these considerations are addressed by other standards.

The comments and suggestions of state agencies on the standard can be summarized as follows:

- The standard does not take into account the proportion of severely disabled in a state. Federal "priorities" are mentioned in the standard, but not in the data element.
- This standard can be used for comparisons within a state over time (e.g., for purposes of internal management), but it cannot be used for comparisons across states. A weighting system is needed for cross-state comparison.

- We should look at the number served rather than the proportion served.
- There is neither a good definition of "target population" nor a good methodology for identifying the target population once it is defined.

The issue of severe disability is mentioned in connection with several standards and data elements. The usual suggestion is that the data element be adjusted for percent severe. Such an adjustment would be appropriate in relation to certain data elements, but may be less appropriate for other data elements. For example, the proportion of severely disabled within a caseload can reasonably be expected to impact negatively on a state's total case volume (i.e., caseload size) and on its costs. Severely disabled clients, as a group, could be expected to require a longer time to complete rehabilitation services, and to require a greater amount of counselors' time, than would be necessary for the group of non-severely disabled clients. As a result, when the severely disabled increase as a proportion of total caseload, time-in-process should increase and counselors' caseload capacity should decrease. Both of these factors point to a decrease in the state's caseload volume potential; that is, to decreases in coverage. Further, costs per client might be expected to go up, both because of increased counselor time requirements per client, and because the severely disabled may require more extensive and more expensive services than the non-severely disabled, in order to achieve rehabilitation. Given the above arguments, adjustments for percent severely disabled may be appropriate for data elements related to coverage and cost-effectiveness.

Such adjustments may not be appropriate, however, for data elements concerned with service impact. In a national study conducted by Berkeley Planning Associates on VR clients closed in 1975, we found that being "severely disabled" had no statistically significant effect on a variety of impact indicators; including successful rehabilitation (closed 26), achieving competitive employment, earning the minimum wage, or retaining earnings one year after closure.[1] That is, other things equal, severely disabled clients were no less likely (in terms of statistical probability) to experience these favorable outcomes than were non-severely disabled clients. While these findings may seem contradictory to common sense, we can think of at least two reasons why they could result. First, the definition of "severe disability" is quite broad. A client may be labelled "severely disabled" for one of many reasons, not always related to the client's specific disability (for example, all clients receiving SSDI are by definition "severely disabled"). Further, it is even questionable whether some disabilities included in the definition really constitute a severe handicap to employment, at least in all cases. For example, while blindness and deafness -- both of which are included in the SD definition -- could be termed severe (i.e., major) *disabilities*, they may not, at least in all cases, constitute a severe *handicap to employment*. It follows, then, that they may not constitute a severe barrier to rehabilitation or to other favorable vocational outcomes. In short, all things considered, the definition of severe disability probably fails as a dimension on which to distinguish clients in terms of their probability for successful outcomes.

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[1] Berkeley Planning Associates; Implementing the Rehabilitation Act of 1973: The VR Program Response; February, 1978.

There is a second reason why severely disabled clients may be as likely to achieve favorable outcomes as the non-severely disabled. Specifically, although SD's may require more time and cost, if the extra time and cost is committed, then chances for success by the severely disabled client are as high as for non-severely disabled clients. Stated differently, the "technology" for rehabilitating SD clients exists. To the extent that counselors are willing and able to commit the resources necessary, then SD's are as likely to succeed as non-SD's.

Given the above arguments, we feel that it probably is inappropriate to adjust performance on impact-related data elements for states' levels of service to the severely disabled. We would make one caveat, however. Specifically, our study, previously quoted, looked at a group of clients closed relatively soon after the priority service mandate was promulgated. It may be that in succeeding years states have attempted to serve an even greater number of SD clients who have truly severe handicaps to employment. If this is true, then the SD population *as a group* may indeed have a lower probability for success than non-SD's, and adjustments to impact data elements may be appropriate.

Given the potential validity and utility of adjustments for percent severe, the question becomes "how should we make the adjustment?" There are two alternative ways to deal with this issue. Both involve the use of a "percent severe" statistic, defined as the ratio of severely disabled clients accepted for VR to the total population accepted (i.e., Status 10 and above) in a given year:

$$\frac{\text{\# severely disabled clients served in a year}}{\text{\# total clients served in a year}}$$

This statistic could be presented on its own either as a new data element under Standard 1, or as a secondary statistic in the reporting system. We recommend that it be made a data element, given the legislative importance attached to serving the severely disabled. However, either alternative would allow administrators to take severity into account when evaluating performance. Unlike the proposal for directly adjusting performance levels for percent severe -- where the effect of the adjustment would be buried within the computation of a data element -- either of the two alternatives would give administrators considerable discretion in deciding where and to what degree it is most appropriate to adjust for severity. This method is in keeping with the Standards' overall goals of simplicity and flexibility.

The second criticism -- non-comparability across states -- is also applicable to other standards. It must be pointed out that such comparisons should not be construed as a contest to see which states achieve the highest score. Rather, interstate comparisons are for informational purposes to help RSA and the state agencies to point out "model" agencies and, through comparative analysis, to pinpoint where and how performance can be improved. As such, the most appropriate cross-state comparisons are those between similar states. A weighting system that adjusts for dissimilarities would be far too cumbersome to be practical. Further, as is discussed in the Analytic Paradigm, the major evaluative concern of the standards is to encourage improved performance by a state in relation to its previous performance. The purpose is not to pit one state against the other. The most important comparisons for this and other standards are within-state comparison over time. Once states have identified problems and devised strategies for their solution, a year-to-year intrastate comparison will give the states the necessary information to evaluate the success of their strategies. Adjustments for state variation are not needed for this purpose.

Regarding the suggestion that we look at the number rather than the proportion served, we can only say that it would be grossly biased in favor of the larger states. Naturally, there would be calls for adjustments based on a state's size. Since this adjustment is incorporated into the very notion of a proportion, we feel that any change would be unnecessary.

Finally, we recognize the importance of the "target group" question. This issue will be addressed under data element (ii).

Recommendations

The following are our recommendations for Standard 1.

- The Standard itself should be retained in its present form, with its present wording.
- In order to address the "priorities among clients" mentioned in the Standard, a "percent severe" data element should be included. It should be defined as follows:

$$\frac{\text{\# severely disabled clients served in a year}}{\text{\# total clients served in a year}}$$

By "served," we mean clients in Statuses 10 and above. The data for this data element would come from the RSA-113 report (after that report is implemented). The particular data sources are:

severely disabled served: RSA-113 IIA4b + IIA5b + IIA6b + IIA7b
Total # clients served: RSA-113 IIA4a + IIA5a + IIA6a + IIA7a

DATA ELEMENT 1 (i): COMPARISON OF CASELOAD SERVED TO EXPENDITURES

This data element was originally conceived as an indicator which could tell states if they had achieved the level of coverage they should have, given their level of resources. As such, while this potential element does not directly measure an agency's service of clients in terms of eligible target population, it does provide a type of relative level of effort and efficiency measure across agencies. When the two concepts are considered in tandem, this measure provides one proxy for coverage. The form and data sources for the data element are as follows:

$$\boxed{\frac{\text{\% national caseload served}}{\text{\% national expenditures}}}$$

Data Source	Data Item Identification
RSA-101	Cases Served = Aggregated states' active cases and cases closed (statuses 10-30)
RSA-2	National expenditure = Aggregated states' expenditures for all monies (state and federal) spent under control of VR agency (110, Trust Fund, SSI and I&E)

The comments of state agencies are presented below.

- If there is a major difference among states in percent severely disabled, they should not be compared.
- We need to make allowances for inter-area differences in price levels.
- We might want to separate administrative costs from other costs.
- The denominator is based on all statuses, but the numerator includes only Status 10 and higher. Choose one or the other but be consistent.

- There are differences across states in the proportion of total funding provided by the federal government. A low proportion will make a state look better.
- This is not really a "coverage" data element.

Some of these criticisms can be answered quite briefly. First, as discussed above, it may indeed be appropriate to either not compare states which differ in their percent severe, or to adjust for that difference. Second, we reject the suggestion of separating administrative costs from other costs, because of the inconsistencies in accounting procedures across states. It would be most difficult to accurately separate and account for administrative expenditures. Yet, if costs are separated without accurate accounting, we may distort the results. Use of total expenditures eliminates this problem. Perhaps even more importantly, the intent of this data element is to indicate efficiency in coverage of the eligible population. To the extent that administrative expenditures ~~are~~ inordinately high, efficiency in coverage has not been achieved. This should be reflected in the data element.

We are aware of the fact that the numerator and denominator are not based on the same population, but we do not consider this an inconsistency. The mandate of Standard 1 is to maximize service, not client assessment. If an agency spends an inordinate amount of resources assessing clients who are eventually closed 08, it indicates some degree of inefficiency in the agency's intake and assessment process.

We agree that there are inter-area differences in price levels which should be taken into account; however, the means to do so are currently lacking. Since this criticism is equally applicable to the data elements of Standard 2, the problem is more serious. We suggest that RSA develop a regional or state-by-state VR cost index, similar to the regional Consumer Price Index already in existence. This index could be used to adjust all expenditure figures used in the Standards.

As regards the comment on federal contributions as a proportion of total resources, we feel there must have been a misunderstanding about how the data element is computed. Specifically, "national expenditures" is defined as the sum of all agencies' total expenditures from both state and federal sources. Thus, the extent of state overmatch is irrelevant.

The most telling criticism, in our opinion, is that this data element does not really deal with coverage. Instead, it measures the efficiency of a state's use of resources. Inasmuch as this issue is addressed in Standard 2, its inclusion under Standard 1 is both redundant and inappropriate.

There is an additional problem with this data element, one not mentioned by reviewers. The crux of the issue is that this data element has problems when used as a performance measure across states, because a given state can improve only at the expense of others. The form of this data element makes it most unlikely that all states simultaneously could achieve a minimal acceptable level of performance (i.e., a ratio of 1.0). This contradicts our main concern that states improve on their past performance.

Recommendations

Our recommendations are two-fold:

- This data element should be dropped from the standards system because (1) it does not address "coverage", and 2) it has problems as a comparative measure of performance. However, RSA could continue to compute this variable to pinpoint "model" (i.e., efficient) and "problem" (inefficient) agencies, for purposes of comparative analysis and triggering of technical assistance.
- If the data element is not dropped, a regional or state-by-state VR cost index should be developed. It should either be used to adjust all expenditure figures or be reported as a supplementary datum to aid in the interpretation of this and other expenditure-related data elements.

DATA ELEMENT 1 (ii): CLIENTS SERVED PER 100,000 POPULATION

Like potential data element 1 (i), this data element does not provide a true estimate of the level of coverage of eligible target population. It does, however, provide a proxy measure of the size of the target population by using the overall state population. If estimating the target population were a straightforward matter, this proxy would not be desirable or needed, but given the need for long-term development of an acceptable target population measure, this proxy serves a potentially useful purpose. Also, it is used now by state agencies, and thus it has some management utility and validity as a performance measure. The form and data sources for the element are as follows:

$$\boxed{\frac{\text{\# served in a given year}}{\text{100,000 population}}}$$

Data Source	Data Item Identification
RSA-101	Number served = Aggregated states' active cases and cases closed (statuses 10-30)
U.S. Census Series P-25	Current best proxy for "eligible population" (that is, proxy in relative, not absolute sense across states). Periodic supportive evaluation should update existing and test new methodologies developed for estimating eligible population.

The comments about this data element focused on four basic issues:

- The validity of the estimated target population is questionable. While using state population (from the Census Bureau) rather than each state's computation of the target population eliminates an unnecessary bias, it is still not a good estimate of the disabled population. Moreover, this data element is largely useless except right after a census, because of problems in developing meaningful estimates of some states' populations between census years. It was suggested that RSA work with sister agencies to get a better estimate of the disabled population.
- This data element reflects the availability of other public services in a state more than it reflects vocational rehabilitation.
- "Cases served" should include applicants as well as active cases. That is, "cases served" should include Status 02 and higher.
- Adjust for percent severe disabilities served to avoid creaming.

The issue of including Status 02 and higher in the definition of "cases served" was addressed under data element (i). To reiterate, the coverage mandate of Standard 1 applies to client service, not to client assessment.

With regard to the severely disabled issue, we would note that this data element represents one of the cases where percent severe should be taken into account when judging performance.

Insofar as a VR agency is located in a state which generously supports public health and rehabilitation services other than VR, it is a boon to that agency. It is, of course, a relevant factor in deciding which states should be considered exemplary models by RSA. States which are able to expand their service capacity through cooperative agreements and use of similar benefits could be considered "models" for other states, and RSA will want to encourage such expansion of service capacity. To some extent, however, this will be beyond the control of RSA or the agency, and the presence or absence of similar benefits will not be used as a reason to reward or punish state agencies. It will, however, be used as a potential explanatory variable in determining (i.e., conditioning) agencies' levels of performance. Finally, the presence or absence of other public services is irrelevant when making year-to-year comparisons within a state, which is the primary use to which the standards will be put.

The validity of the target population is a more serious issue. There is some merit to the arguments that population estimates between census years lack precision for those states experiencing rapid population growth or decline, and that in any event, total state population may not be the most valid indicator of a state's disabled population. While not a true estimate of the level of service by an agency, this statistic does provide a proxy measure of the size of the target population. To the extent that disabilities are uniformly distributed across states, state population will be an unbiased proxy for the target group. As noted above, were estimating the target population a straightforward matter, this proxy would not be desirable or needed; however, this proxy can serve a useful purpose until an acceptable target population measure is developed.

We agree that RSA should become involved in an effort to develop a better estimate for the target population. The Ridge-Worral method seems to be an appropriate point from which to proceed in this development. Its main failing is that currently the figures it generates are out-of-date because they are based on the 1970 census. This can be rectified in the short term by using the 1980 census to bring the figures up-to-date. In the long term, it is also necessary to persuade the Census Bureau to collect more pertinent information on disabilities when conducting population estimates between census years, so that the Ridge-Worral method can be used in succeeding years with more current input data. While the Census Bureau's compliance is by no means guaranteed, this option is certainly worth exploring.

Recommendations

We have two recommendations regarding this data element:

- The data element should be retained as is for the short term.
- RSA should become involved in the development of a more precise estimate of the target population for long term use. The Ridge-Worral method should serve as the point of departure in this development, and it may suffice if cooperation from the Census Bureau can be obtained.

FINDINGS FROM THE PRETEST DATA

Table 8 presents the results of the analysis of pretest data collected for the Standard 1 data elements. We have recommended dropping data element (i) for a variety of reasons. First, the figures may reflect the size, caseload capacity, and attendant economies of scale of different agencies, as much as or more than they reflect "efficiency of coverage" per se. Second, we noted earlier that the data element represents a "closed system": one state advances at the expense of another. This is illustrated quite clearly in the table, although the data is "static" (i.e., shows only one year's worth of performance). Consequently, while the Pennsylvania data shows far more success than the other five agencies, careful attention should be given to the contributing factors not captured in this measurement.

Figures for data element (ii) vary quite substantially. Again, Pennsylvania registers the highest figure, Mississippi Blind the lowest. However, two considerations should be taken into account when judging Mississippi's performance. First, as a blind agency, its relevant population is a much smaller proportion of the state's total population than would be the case for the other five general agencies. This suggests that, to the extent states are compared, they should be compared within types of agencies, as is done within the current standards system. Second, its client population is much more likely to contain a very high proportion of severely disabled, which as discussed above would lead to a lower performance expectation on this coverage data element.

Table 8

Statistics for Standard 1

Data Element	Equation	State					
		VA	PA	MI	DE	OR	MS BLIND
1 (i)	$\frac{\text{\% National Caseload Served}^{[1]}}{\text{\% National Expenditures}}$[2]	.81[3]	1.26[3]	.94[3]	.57[3]	.74[3]	.37[3]
1 (ii)	$\frac{\text{\# Served in Given Year}^{[1]}\ \text{(1979)}}{\text{100,000 Population}}$[4]	474.1	690.9	416.2	404.6	538.3	058.4

Data Sources:
1 RSA-101
2 RSA-2
3 Based on six-state sample.
4 Current Population Report, Population Estimates and Projections, July 1979 U.S. Bureau of the Census; Series P.25, #876

STANDARD 2: THE VOCATIONAL REHABILITATION PROGRAM SHALL USE RESOURCES IN A COST-EFFECTIVE MANNER AND SHOW A POSITIVE RETURN TO SOCIETY OF INVESTMENT IN VOCATIONAL REHABILITATION OF DISABLED CLIENTS.

Data Elements:

	(i)	Expenditure per competitively employed closure
	(ii)	Expenditure per 26 closure
	(iii)	Benefit-cost ratio
	(iv)	Discounted net present value

This standard is the one most obviously related to the program's cost-effectiveness goal. Two issues are addressed by this standard. The first is the issue of cost-effectiveness: with the financial resources available to the state (or sub-region, or district, or counselor), how successfully did it achieve desired objectives? The second issue revolves around cost-benefit concerns (i.e., "return on investment"). Specifically, the standard asks the question: Are we getting more out of the program than we put in? Currently, benefits from the program are measured primarily in monetary terms (e.g., in terms of wages earned, taxes paid, and public assistance foregone). Unfortunately, this "hard-nosed" monetary focus omits consideration of many of the other benefits derived from VR (e.g., increased functional capacity). Work is underway to develop methods for taking such benefits into account.[1] In the interim, however, monetary cost-benefit measures will continue to be important, particularly in the current era of budget constraints and intensifying scrutiny of governmental activities. As such, RSA can profit from use of a cost-benefit measure in terms of public relations value, as well as in terms of improving its own self-evaluation capacity.

Many different cost-effectiveness data elements were considered in the design of the Standards. Essentially, any data element requires in the denominator a measure of program achievement and in the numerator some measure of resources of the kind which the agency is particularly anxious to use efficiently. We chose total expenditures for the numerator because it overcomes various accounting problems, for example, "what is a service cost" and "what is a counselor FTE?" The denominators were chosen because of their relatively universal acceptance as measures of "success."

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[1] This work is being conducted by the Texas Institute for Rehabilitation Research (TIRR).

Benefit-cost models estimate total benefits and total costs in terms of dollars. These models are neutral with regard to type of delivery strategy. As such they do not penalize agencies which choose to spend more per client in order to produce better results. Any cost-effectiveness measure, on the other hand, focuses on rewarding states which minimize costs in achieving a given objective. Units of the outcome measure are assumed to be equal in value, i.e., one rehabilitation (26 closure) is as good as any other rehabilitation. In order to offset these limitations, it is required that the outcome or benefit measure be one which decision-makers are prepared to view as having high value and units of equal value.

The following comments illustrate the wide variety of opinions regarding this Standard:

- Standard #2 appears to be acceptable as stated.
- Benefit-cost analysis is certainly one of VR's strongest selling points to show a positive return of investment. However, in establishing data elements and in ultimately interpreting the results the weak points in cost-benefit analysis must be enumerated and, if at all possible, remedied.
- This Standard is the only one that deals with the efficiency concept, and it does it poorly by using either confusing and overly complex data elements like (iii) and (iv) or too broad and general elements like (i) and (ii).
- We need information that is useful at the counselor level.
- Expenditures should be broken down by administrative, reporting, and specialist costs.
- If VR agencies are to be evaluated in terms of cost effectiveness, some attempt should be made to control for factors external to the program which may impact upon cost effectiveness related statistics. Perhaps employment and other economic statistics should be collected by RSA and reported as supportive evaluation elements.

- State standard in terms of "maximizing" the return to society.
- There is a conflict between Standard 1 and Standard 2. Do you try to serve a lot of people, or do you try to find jobs for those who can work?

The benefit-cost model is admittedly a complex formula. However, its components capture well-established and well-understood concepts, such as total agency costs, case service costs, and client earnings at referral and at closure.

The next two comments both involve the inclusion of additional information in the data elements. Obtaining information useful at the counselor level would necessitate adding information on expenditures and caseload for individual counselors. This is something that individual states can do, if they so choose, by incorporating counselor identification information into their financial and caseload management information systems. It would not be appropriate, however, to include this information in a national standards system.

The suggested separation of agency expenditures into its components was considered and rejected for the cost-effectiveness data elements. It was rejected because the differences across states in accounting procedures and budgeting conventions would complicate an otherwise simple and intuitively obvious data element.

The suggestion that the Standard should be stated in terms of maximization indicates a degree of misunderstanding regarding the nature of this Standard and its data elements. The "positive return to society" is addressed by the benefit-cost measures. Demonstrating a positive return to society is a minimum condition for fiscal responsibility. It is a constraint, not a goal. "Maximizing" the return, on the other hand, would create too strong a disincentive to serving those clients with a low probability of success (e.g. the severely disabled). This could lead to over-achievement in the fiscal area at the cost of under-achievement in the service delivery area.

Finally, a reviewer pointed out the conflict between Standard 1 and Standard 2. This problem is common to most or all the Standards. The goals of VR are often in conflict, and this conflict is reflected in the Standards. The important thing to remember here is that the Standards must be viewed as a whole. The aim of an agency should not be to fulfill the mandate of one standard *or* another, but to achieve a balance among *all* the standards.

Recommendation

Standard 2 should be retained in its present form.

DATA ELEMENT 2 (i): EXPENDITURE PER COMPETITIVELY EMPLOYED CLOSURE

This data element compares total agency expenditures to the number of competitively employed 26 closures. It applies the most stringent criteria to the measurement of cost-effectiveness by focusing on only those 26 closures who are *competitively* employed. Such a priority may not in fact be desired, particularly given the recent emphasis on service to the severely disabled. However, we included this data element because we feel that, historically and even today, a consensus exists that competitive employment is one of the higher quality and most desirable types of closure obtainable. The form and data sources for this element are as follows:

$$\boxed{\frac{\text{Total Agency Expenditures}}{\text{\# Competitively Employed 26 Closures}}}$$

Data Source	Data Item Identification
RSA-2	Agency Expenditures = All monies (state and federal) spent under control of state agency (110, Trust Fund, SSI, I & E).
RSA-300	Select for 26 (Part 3.N.2); Competitive work status at closure.

The following issues were raised concerning data element 2(i).

- There are questions regarding the interpretation/documentation of what constitutes "expenditures." There is a need for detailed definitions of what is meant by "agency expenditures."
- Expenditures are those of an agency; similar benefits are not included. Comparing states with and without similar benefits doesn't work.
- This element does not deal with the actual cost of 26 closures. It should calculate the average cost of a 26 closure.
- There is a very high negative correlation between rehabilitation rates and unemployment rates. Adjustments are needed for cost of living and unemployment for each state.
- Closing sheltered employment creates skewed data. It is actually non-competitive, but would be coded as competitive.
- This data element ignores non-competitive closures. It costs money to get them where they are.

Total agency expenditures are taken from form RSA-2, Annual Report for Vocational Rehabilitation. They include the following:

1. Obligations from Section 110 of the Rehabilitation Act, Part III, line 8: Total Expenditures.
2. Obligations from Social Security Trust Funds and SSI Program, Part IV, line 4: Total Obligations and Allowances.
3. Obligations from Section 120 of the Rehabilitation Act, Part V., line 7: Total Expenditures.

The issue of similar benefits first arose under data element 1 (ii). We repeat that while such benefits do influence state performance, taking into account all interstate differences in the value of similar benefits when computing a data element is a very difficult and complicated matter for which the cost would far outweigh the increase in usefulness. The Supportive Evaluation, however, will identify interstate differences in similar benefits, and these will be taken into account when recommending corrective action.

The cost-effectiveness measure should not calculate the average cost of 26 closures for two reasons. First, calculating the average cost of 26 closures requires the use of life of case costs which do not account for inflation; also, they are less reliable than measures of current costs. Second, the "costs" in cost-effectiveness should not be limited to expenses directly attributable to 26 closures. Rather, it should take into account all expenses incurred during the course of producing the desirable results (i.e., successful rehabilitations). The extent to which agencies incur expenses with undesirable results (i.e., 28's and 30's) is a measure of the inefficiency of that agency. It is necessary to include the expenses attributable to "failures" and "partial successes" when assessing cost effectiveness.

Recommendation

The main weakness of this data element is that it excludes non-competitive closures from the computation. This implies that a non-competitive closure represents "no gain" to the client so closed. BPA does not wish to imply this, and thus it might be reasonable to exclude the data element from the standards. However, this data element's weakness is also its strength. That is, the data element allows agencies to measure the cost-effectiveness of their services in terms of VR's highest goal -- achievement of competitive employment. Given this, and the fact that data element 2 (ii) gives credit for non-competitive closures, we recommend retaining this data element.

DATA ELEMENT 2 (ii): EXPENDITURE PER 26 CLOSURE

This cost-effectiveness measure relaxes the measurement criteria somewhat to allow "credit" for all types of rehabilitations. It recognizes that some clients are not capable of achieving competitive employment and that other employment outcomes can represent achievement commensurate with a client's abilities. This data element compares total agency expenditures to all 26 closures, thus capturing the effect of gainful activity, whether it lies in the realm of competitive or non-competitive employment. The form and data sources for this element are as follows:

$$\frac{\text{Total Agency Expenditure}}{\text{\# 26 Closures}}$$

Data Source	Data Item Identification
RSA-2	Agency Expenditure = Same as 2 (i)
RSA-101	26 Closures

As was the case with the previous data element, concern was voiced over the definition of expenditures, the inclusion/exclusion of similar benefits, the desire for an "average cost per 26" figure, and the need for cost of living and unemployment rate adjustments. These are discussed in the previous section. Additional comments were as follows:

- We want comparison of similar states, not nation-wide.
- Investigate possibility for inclusion of non-26's whose quality of life has improved as a result of VR services.
- This is redundant with data element 2 (i).

We agree that the most appropriate comparisons are those between similar states and within a state over time; however, this does not negate the need for all agencies to strive for cost effectiveness in their delivery of services.

The inclusion of non-26 closures is not appropriate. The "effect" part of cost-effectiveness refers to the goal an organization is trying to achieve. In the case of VR agencies, the goal is successful rehabilitation of 26 closures. Other types of closures may be valid under some circumstances, but they are always "second-best" alternatives and cannot be considered as the primary desired effect of VR.

Finally, although somewhat redundant with data element 2 (i), it provides additional information useful in assessing performance.

Recommendation

This data element should be retained. Use of this data element would be enhanced by development of a "cost of VR services" adjustment, similar to the Consumer Price Index, as discussed under data element 1 (i).

DATA ELEMENTS 2 (iii) and 2 (iv):

(iii) Ratio of Total VR Benefits to Total VR Costs.

(iv) Net Total Benefit from VR Services.

These two data elements are very similar in concept, and they elicited virtually identical comments from VR agencies. Therefore, they will be discussed together, and the comments of reviewers will be addressed following the discussion. The forms of these data elements and the sources of the data are shown below.

Data Element 2 (iii)

$$\boxed{\frac{\text{Benefits}}{\text{Costs}}}$$

Data Sources	Data Item Identification
RSA-300 RSA-2 Follow-up Survey	Benefits and costs are social discounted present values. In the benefit-cost ratio, the benefits are divided by costs (B/C); used to compare agencies.

Data Element 2 (iv)

$$\boxed{\text{Benefits - Costs}}$$

Data Sources	Data Item Identification
R-300 RSA-2 Follow-Up Survey	Benefits and costs are social discounted present values. In the discounted net present value, benefits have costs subtracted (B-C); used to compare changes over time in performance level for a particular agency.

Benefit-cost modeling of social service delivery systems enjoys current wide acceptace as a measurement tool. Its use extends considerably beyond the VR field. The figures provided by benefit-cost analysis yield a single number which is an immediate indicator of program success. Because of its surface simplicity, and because it is a popular sosphisticated analytic tool for evaluating program worth, the benefit-cost of the VR system is included as a standard.

As a review for the National Science Foundation has noted, benefit-cost applications in the VR field are more extensive and have generally been more sophisticated (or at least at a higher level of technical quality) than in most other social service and manpower program areas.[1] There are a number of models available for use. In one case, RSA commissioned the development of a model for routine use by the program, which was designed to be adaptable to the needs of many users (i.e., state agencies, RSA contracted evaluation studies, RSA itself) and to be capable of periodic updating and refinement as new data became available. That model, developed at the University of California, Berkeley and subsequently refined by BPA staff, has been used by RSA, several state agencies, the Urban Institute, Abt Associates, National Analysts, and Greenleigh Associates, among others, usually under RSA recommendation.[2] This model is the basis for the two data elements proposed for use in measuring benefits in relation to costs in terms of:

- a ratio $\frac{(\text{Benefits})}{(\text{Costs})}$
- a net difference (Benefits-Costs)

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[1] Berkowitz and Anderson, PADEC -- An Evaluation of an Experimental Rehabilitation Project, Rutgers University, 1974.

[2] Frederick C. Collignon and Richard Dodson. Benefit-Cost Analysis of Vocational Rehabilitation Services Provided to Individuals Most Severely Handicapped (ISMH). April 1975.

Both of these formulae use the discounted present value of social[1] benefits and costs, and both use the same components to arrive at benefits and at costs. These components, in brief, are as follows:

Benefits

- discounted value of paid earnings;
- change in output of homemaker closures;
- change in output of unpaid family workers;
- change in "after hours work" (e.g., homemaking tasks performed by wage-earning rehabilitants);
- fringe benefits;
- change in output of families of rehabilitants (as a result of rehabilitants assuming homemaker tasks);
- reductions in public assistance benefits;
- repeater costs (a "negative benefit").

Costs

- total program costs during the fiscal year, minus carryover costs and maintenance costs;
- costs borne by parties other than VR;
- research, training, and demonstration costs;
- benefits foregone by clients during participation in VR services (i.e., any wages and fringe benefits foregone by clients with earnings at referral); and
- client-borne costs for VR services.

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[1] A comparison of the full costs and benefits of a VR program can be undertaken from several perspectives. Perhaps the most common benefit-cost perspectives are the "taxpayer" perspective and the "social" perspective. In taxpayer BC, we compare direct administrative and service costs of the VR program as well as the costs of other government agencies providing benefits and services to the client population (SSI, SSDI, Food Stamps, Medicare, other employment and supportive services) with benefits such as taxes that successful rehabilitants pay from their earnings and savings in public assistance. Social BC takes the broadest perspective, incorporating the widest range of costs and benefits and including on the cost side, for example, costs borne by clients and, on the benefit side, client earnings as an addition to the GNP.

The net benefit measure (B/C) is included among the standards data elements primarily because it is the preferred approach of economists. The problem with the measure is that it is very sensitive to the scale of program operation: in the case of VR, for example, larger agencies would produce greater total net benefits than small agencies, simply because of their larger caseloads. Thus the measure is inappropriate for comparing across state agencies, although it is potentially useful for observing change over time within an agency. The ratio measure (B/C) overcomes the problem of agency size, thus allowing comparison across agencies. As well B/C can be used to observe change over time within a single agency.

The following issues were raised by reviewers with regard to data elements 2(iii) and 2(iv).

- Probably a necessary evil, but not intuitively useful.
- Question the use of benefit cost ratio. The literature is dubious at best about benefit cost analysis.
- What are the costs and benefits of Homemaker and Unpaid Family Worker?
- There are a lot of sheltered workshops which are allowed to hire under the minimum wage.
- The SSA data base has limitations because it records total payroll contributions on a quarterly basis. Actual earnings, whether from full time or part-time employment, or employment during a partial or a full quarter are not determinable from the data base.
- We should consider the social cost of the non-employment of workers who have "lost out" in the competition with handicapped workers.
- This data element should be eliminated for the following reasons:
  - SSA Data Link is not yet established.
  - Follow-up survey questions are unduly detailed for many clients.
  - The mathematical formulation is too complicated to be meaningful.
  - Cost of data gathering and calculations would exceed possible benefits to VR clients.

- Standard 7 (ii) provides a similar measure.

Benefit-cost analyses are included as data elements because we believe they are the most feasible method of establishing VR's "positive return to society." Obviously, there are differences of opinion concerning how useful or meaningful the analyses are. While we acknowledge that legitimate differences of opinion may exist, we maintain our belief that benefit-cost analysis is a necessary and appropriate part of the Standards system.

The costs associated with homemakers and unpaid family workers are the same as those for any other 26 closure. The benefits of a homemaker are determined by estimating the "worth" of homemakers in the general population; that is, by estimating the dollar value of the various functions performed by a homemaker. The worth of disabled homemakers is assumed to be some proportion (less than 1) of the worth of homemakers in general. This proportion is then estimated to be the same as the proportionate worth of disabled workers to normal workers. Unpaid family workers are treated similarly. The value of a sheltered workshop employee is his/her market value, i.e., his/her wages, regardless of whether they are above or below the minimum wage.

The value of the SSA data is a moot point at present because the current model uses clients' reported earnings in assessing the benefit of VR. This issue may become relevant in the future if we ever try to use SSA data to obtain an estimate of clients' pre-program earnings; however, it is not a problem at present.

There is a term in the model for workers who have been displaced by handicapped workers. The term estimates the negative impact on these displaced workers. The term currently has a value of zero because there is no evidence of substantial impact in today's economy. This is, of course, not relevant to BEP or sheltered workshop employees.

Recommendation

Despite the complexity of the benefit-cost formula and the differences of opinion regarding its utility, we believe it has an important place in the Standards system. We recommend that data elements (iii) and (iv) both be retained.

FINDINGS FROM THE PRETEST DATA

Table 9 presents our findings on Standard 2, using the pretest data. The benefit-cost ratio and discounted net present value (DNPV) indicator are calculated using a 13% discount rate. The results show very clearly that Blind agencies must not be compared to general or combined agencies. Recall also that the DNPV is very sensitive to agency size, and thus is only appropriate for use as an over-time, intrastate indicator.

Table 9

Statistics for Standard 2

Data Element	Equation	State					
		VA	PA	MI	DE	OR	MS BLIND
2i	$\frac{\text{agency expenditures}^{1}}{\text{\# competitively employed 26 closures}^{2}}$	5,020.23	3,532.60	4,423.92	5,437.43	4,385.55	14,294.65
2ii	$\frac{\text{agency expenditures}^{1}}{\text{26 closures}^{3}}$	3,892.78	2,408.64	4,146.89	4,461.30	3,941.55	6,834.09
2iii	$\frac{\text{benefits}}{\text{costs}}$	9.258	11.836	10.516	7.057	8.606	.935
2iv	benefits - costs (in $ millions)	284.55	794.21	470.82	30.97	190.36	-.3

Data Sources: 1 RSA-2
2 RSA Statistics Division
3 RSA-101

STANDARD 3: VR SHALL MAXIMIZE THE NUMBER AND PROPORTION OF CLIENTS ACCEPTED FOR SERVICES WHO ARE SUCCESSFULLY REHABILITATED, SUBJECT TO THE MEETING OF OTHER STANDARDS.

Traditionally, success in VR has been measured by the number of "26 closures," or successful rehabilitations obtained. The VR goal is to rehabilitate clients, and to ignore that goal in the standards system would be a serious and uncomfortable omission. VR does need to know how many individuals it successfully serves and must have encouragement to rehabilitate as many persons in need as possible. Only one data element -- the proportion of accepted clients closed 26 -- was originally proposed for this standard:

Data Element 3 (i)

$$\frac{\text{\# of 26 closures}}{\text{\# of 26+28+30 closures}} \times 100$$

Data Source	Data Item Identification
RSA-101	26 closures during fiscal year
RSA-101	Total accepted clients closed (26+28+30) during fiscal year

This standard embodies the most basic measurement of the program's success in achieving its goal of providing quality services. Specifically, if we accept the rehabilitation rate (i.e.,percent closed 26) as an adequate measure of success, then by inference it follows that to the extent a state agency has increased the proportion of clients closed 26, its overall service quality has improved as well.

Two points need noting regarding this standard. First, this standard is concerned with the quality of clients' outcomes. The standard does not attempt to measure the actual quality of the services (e.g., a good vs. a bad training program), or the appropriateness of the service in relation to the clients' needs, or the process by which services are provided. Without doubt, each of these characteristics of service provision are important in their impact on outcomes. However, since there is a universally accepted outcome measure in the "26", process measures are less important than in social programs which cannot measure impact. Leading researchers and program officials in a national meeting on quality concurred that if such outcome measures exist, they should be used.[1]

The second point concerning Standard 3 is that by focusing on the proportion of 26 closures, the standard fails to distinguish among different kinds of rehabilitation outcomes. For example, by looking at "%26" we do not know the extent to which clients are able to earn a "living wage," or the success with which clients retain the benefits of rehabilitation over time. However, these and other considerations are taken into account by other of the revised standards. Regardless of the broadness of standard 3, it is still appropriate to retain the standard and its data element as the most basic measure of quality in the rehabilitation system.

The following represents a synopsis of the comments and suggestions offered concerning Standard 3:

- In spite of its well-documented failings, the success ratio is probably the best single measure of program effectiveness.
- Using the success ratio without controlling for disability will promote mediocrity.
- Use adjustment for % severe to avoid "creaming."

$$\frac{\%\ \text{severe (STATE)}}{\%\ \text{severe (NATIONAL)}} \times \frac{\#26\text{'s}}{\#26\text{'s} + \#28\text{'s} + \#30\text{'s}}$$

- Divide 26 closures into 2 categories: homemakers and those competitively employed.
- Only half the stated standard is reflected in the single data element, which focuses on "proportion" and ignores "number."

Data element 3(i) is a valid statistic on its own and does not need a built-in adjustment for severity of disability. However, under some circumstances (e.g., comparison of dissimilar agencies), the data element may be more meaningful when interpreted in light of severity. The "percent severe" data element that was recommended for inclusion under Standard 1 should serve this purpose adequately. This is not done algebraically, but rather by comparing performance on the two data elements.

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[1] Human Services Research Institute and Berkeley Planning Associates, Assuring the Quality of Human Services: A Conceptual Analysis. Berkeley, California, January 30, 1980.

We oppose the division of 26 closures into homemakers and those competitively employed. "Padding" 26 closures with homemakers will show up when comparing the results of Standard 2, data elements (i) and (ii), and in Standard 5, data element (i). Thus, we believe that homemakers and competitively employed workers should both be included in this standard.

It is true that data element 3 (i) is a proportional measure of 26 closures; however, it does not entirely ignore the number of such closures. In the reporting system, both the numerator and denominator will be reported along with the ratio. The numerator is the "number" referred to in the Standard. Nevertheless, it would be appropriate for this standard to include a data element which focuses only on the number of 26's without relating them to 28's and 30's. To this end, we suggest including a new data element under Standard 3: the net increase or decrease in 26 closures in a year compared to the previous year. Data for both components would come from the RSA-101.

FINDINGS FROM THE PRETEST DATA

Table 10 presents the results from the analysis of the pretest data pertaining to Standard 3. Data for this data element were obtained from the RSA-101. As can readily be ascertained, each of the six state agencies successfully closed at least 50% of their closed cases during fiscal year 1979, with values ranging from a low of 52.5% to a high of 85.4%.

This Table will be more informative when it is augmented by the proposed new data element. This element, a statistic showing the net annual increase or decrease in 26 closures, will provide a fuller indication of whether agencies are maximizing the number of 26 closures.

Recommendations

The comments of reviewers and our own analysis indicate that Standard 3 and its data element are acceptable but insufficient. The Standard's mandate for maximizing the number of 26 closures should be given equal weight with the mandate for maximizing the proportion of 26 closures. We therefore recommend the following:

Table 10

Statistics for Standard 3

Data Element	Equation	State					
		VA	PA	MI	DE	OR	MS BLIND
3i	$\frac{\text{\# of 26 closures}}{\text{\# of 26+28+30 closures}}$	62.4%	73%	52.5%	76.9%	67.4%	85.4%

Data Source: RSA-101

- Both the Standard and the data element should be retained in their present form.
- A new data element should be added to this Standard.

(#26 closures in current year) minus (#26 closures in preceding year)

STANDARD 4: REHABILITATED CLIENTS SHALL EVIDENCE INCREASED ECONOMIC INDEPENDENCE.

Data Elements:

(i) Percent 26 closures with weekly earnings at/above federal minimum wage

(ii) Comparison of earnings of competitively employed 26 closures to earnings of employees in state

(iii) Comparison of earnings before and after VR services

(iv) Comparison of 26 closures with public assistance as primary source of support before and after VR services

VR's most basic purpose is to assist disabled persons in finding gainful employment. The extent to which clients improve their ability to be economically self-sufficient (i.e., "independent") through gainful employment is a fundamental concern of VR. Since most clients have low levels of economic self-sufficiency upon entry to VR, this standard is stated in terms of improving economic independence.

Achievement of economic independence is one facet of closure quality of interest to VR, and thus this standard is included in that group of standards concerned with the quality of services; however, "economic independence" means different things depending on the type of 26 closure obtained. Thus, a variety of data elements are needed to capture the concept.

In addressing the measurement of increase in economic independence for clients rehabilitated, the logical place to look is to wages and wage increases. Three data elements are used to assess wages: comparison to the national standard (the minimum wage); comparison to state norms; and comparison of earnings after closure to earnings prior to entry to VR. A fourth data element considers a different aspect of economic independence: that of dependence on public assistance. That data element compares the porportion of clients at referral and at closure who rely on public assistance for their primary source of support.

The following is a summary of the comments offered concerning the Standard:

- It is difficult to measure a homemaker's or unpaid family worker's increase in economic independence in terms sufficiently quantifiable to establish performance limits.
- Client income data is difficult to obtain and unreliable.
- The Standard addresses a target group that state agencies have not been instructed to emphasize (i.e., competitive closures).
- Emphasis on competitive closures and earnings levels could prove a disincentive to serving the severely disabled.
- Part of this Standard overlaps with Standard 5; they should be condensed into a single Standard.

It is true that measuring "economic independence" for homemakers and unpaid family workers is difficult. Data element 4(iv) represents an attempt to resolve the difficulty of measuring the degree of economic independence of homemakers and unpaid family workers.

We would note several points in response to the comment regarding the unreliability and difficulty of obtaining client income data. First, income data is not, or should not be particularly difficult to obtain. Successful clients are supposed to be functioning in the closure occupation for two months prior to closure. This is adequate time to obtain such data, particularly since counselors (if they are doing their job) must contact the client prior to closure to verify that the client has maintained employment for the two month period. Second, as far as reliability goes, it is true that some reliability problems exist. However, in an earlier BPA study we found that these consist mainly of "overstatement" problems (i.e., the R-300 reports more than the client reported). Further, the degree of discrepancy was small enough, for the total group, to be of little concern in relation to our proposed data elements, which deal with rather gross indicators (e.g., "earning at least the minimum wage") and with agency-wide averages. Third, and finally, the fact that client income data may have some reliability problems does not outweigh the major relevance of client earnings to evaluation of state agency performance. The fact is that the comment regarding client income data indirectly criticizes the agency's own data base: data elements 4(i), 4(ii), and 4(iii) all use income data obtained from the R-300. As we have stated over and again, we would prefer to have income data based on the proposed SSA data link, but in the absence of an annually updated data link, and inasmuch as the R-300 income data has been used continuously by RSA and state agencies for evaluation and public relations purposes, we see no reason why, now, the reliability issue should provide adequate rationale for discarding the standard.

We agree that this standard implicitly emphasizes competitive employment closures and that, on its face, the standard might discourage service to the severely disabled; however, two points are relevant in response. First, we have included data elements within the total standards package which "give credit" for non-competitive closures, and which would be taken into consideration in evaluating a state's overall performance. Second, to the extent that the severely disabled are more difficult to place in competitive employment (and, as discussed under Standard 1, we are not convinced that they are) the disincentive to serving SDs can be overcome by including the proposed "percent severe" data element in the process of assessing state performance.

The overlap between Standards 4 and 5 has been noted and will be addressed under Standard 5.

There is a problem with Standard 4 that has not been voiced by the VR agencies. The stipulation under this Standard of increased economic independence implies that it is the responsibility of VR to maximize the economic independence of individual clients. In our opinion, it is more appropriate for VR to achieve a minimum level of economic independence for as many clients as possible. Any financial gain beyond this minimum level is, of course, desirable, but this is not something for which VR should be held accountable.

Recommendation

In order to reflect more accurately the true purpose of VR, the word "increased" should be deleted from this standard.

DATA ELEMENT 4(i): PERCENT OF 26 CLOSURES WITH WEEKLY EARNINGS AT/ABOVE THE FEDERAL MINIMUM WAGE

When attempting the measurement of economic independence for rehabilitated clients, particularly in competitive employment, the logical place to look is to wages. The first data element for this standard compares the wages of wage-earning rehabilitants to the "standard" of the federal minimum wage. There are state minimum wages which may be higher than the federal wage, and not all employers must pay federal minimum wages under all circumstances. The normative implications of this data element are that a disabled person should be expected, under equivalent circumstances, to make at least the minimum required by law for citizens of the U.S. The form and data sources for this data element are as follows:

$$\boxed{\frac{\text{\#26 closures with weekly earning level at/above federal minimum wage}}{\text{\#26 closures}} \times 100}$$

Data Source	Data Item Identification
RSA-300 Statistical Abstract of U.S.	Select for 26 (Part 3.N.2); Weekly earnings at closure; Weekly federal minimum wage = 35 hours X hourly minimum wage (BLS definition)
RSA-300	26 closures

The comments regarding this data element are summarized below.

- Good statistic for evaluation.
- This data element contains two ideas: "Are 26s working at or above minimum wage?", and "Are they working full-time or part-time?" The former is more important here. The latter will be picked up in 4 (ii).
- This assumes that weekly earnings at or above the federal minimum wage represent increased economic independence.
- This should be based on average weekly earnings to account for seasonal work.
- There is no standard way of reporting weekly earnings for homemakers, unpaid family workers, and trainees. We need to specify a uniform coding.
- Wages of severely disabled clients are not likely to be commensurate with competitive wages.

This data element used the weekly minimum wage figure as the standard rather than the hourly wage, because the former more accurately captures the concept of this Standard. Whereas hourly wage indicates a measure of the employee's worth to the employer, total (i.e., weekly, monthly, cumulative yearly) earnings is a better indicator of the employee's financial well-being (i.e., how much money he/she makes, and whether that amount can support him/her). If an employee is able to work only five hours a week, his/her economic condition will be affected by this as well as by the hourly rate. Thus, total earnings is the more appropriate indicator of economic independence.

Average weekly earnings probably has greater validity than does previous week's earnings, because the latter does not take into account layoffs and seasonal fluctuations in the economy. While this is true in principle, it is not clear whether it presents a problem in practice. Moreover, average earnings are almost certain to be less reliable. Finally, taking seasonality into account requires a delay of at least a year before data collection, adding to the problem of timely data reporting.

Weekly earnings for homemakers, unpaid family workers, and trainees are by definition "zero." (Excepting, of course, any earnings such people may get through work outside their closure occupation, such as babysitting.) This can be entered directly onto the R-300, or recoded for analysis in those states which enter a "not applicable" code for earnings at closure.

Again, we question whether it is true that wages of severely disabled clients are "not likely" to be commensurate with competitive employment. Further, to the extent that wages are lower, this can be accounted for using the "percent severe" data element.

Recommendation

Given that most problems can be dealt with adequately, we recommend retaining data element 4(i) in its present form.

DATA ELEMENT 4(ii): COMPARISON OF EARNINGS OF COMPETITIVELY EMPLOYED 26 CLOSURES TO EARNINGS OF EMPLOYERS IN STATE

In this data element, the wages of rehabilitants are compared to a standard or wage rate for the general population, as in (i). In this instance, however, the focus of the comparison is mean wage of closures with wages to the mean wage of employees with wages in the state.

This method controls for state-to-state variation in earnings levels, whereas using the federal minimum wage as a denominator does not. Otherwise, the concept behind this data element is the same as with (i): to compare the wages of rehabilitated disabled clients to those of the "general" population. In some respects, this is a more comprehensive indicator than data element (i), because it provides an estimate of clients' "standard of living" relative to other persons in the state. In general, as wage levels increase, so does the cost of living, and the amount of income required to maintain an "acceptable" standard of living. Since the data element incorporates cost of living (via state wage norms), we obtain a better measure of clients' living standards relative to the surrounding environment. In contrast, the federal minimum wage is not set with reference to local cost of livings considerations. The form and data sources are as follows:

$$\frac{\text{Mean weekly earnings of competitive employed 26 closures}}{\text{Mean weekly earnings of employees in state}}$$

Data Source	Data Item Identification
RSA-300	Select for competitively employed 26 closures (Part 3.I.1. plus 3.I.3); Weekly earnings at closure
U.S. Bureau of Labor Statistics	Employees = production workers in manufacturing industries

The major criticism of this data element focused on the appropriateness of the denominator.

- The data element is a good evaluation tool.
- We like the idea. It is a realistic appraisal for people who work in the state.
- The data element is acceptable provided RSA can get composite figures for the mean wages of employees in each state.
- Using production workers' wages as a divisor seems to be too limited a comparison. Their inflated wages in some states will bias interstate comparisons. Furthermore, 26 closures are new entrants into the labor market and can be expected to earn 25-30% less than workers in general, possibly leading to misinterpretations of the data element.

Caution must be exercised when interpreting any single data element, to ensure it is considered in context. For example, the wages of newly-placed clients will, of course, not equal wages of production workers. This problem will be particularly troublesome in states with highly skilled or highly unionized industries; however, it is awkward and costly to compute the average wage upon entry into the labor market. This measurement provides a basis for year-to-year comparison within states to determine the extent to which an agency's placements are keeping pace with the general economic conditions within a state.

Recommendation

This data element should be retained in its present form.

DATA ELEMENT 4(iii): COMPARISON OF EARNINGS BEFORE AND AFTER VR SERVICES

The first two data elements discussed compare wages of rehabilitants with the wages of the general population or a federal standard. This data element, however, is concerned with the difference in the client's own wages before and after the rehabilitation process. It is generally expected that persons in need of rehabilitation services should be able to increase their wages after rehabilitation. In a number of cases, however, wages will not increase but will remain at their pre-rehabilitation level or will even decrease, especially in the case of a newly disabled person (e.g., spinal cord injury) who is to be retrained for a new occupation.

Two variations of this data element were considered: one using weekly earnings data from the R-300; and one using yearly earnings data obtained from the Social Security Administration (through a new institutional "data link"). In the former computation, we would obtain the mean earnings of 26 closures at closure and divide by the mean earnings of those clients at referral. Such a measure would indicate, for the group concerned, the ratio of the average closure earnings to the average referral earnings. The chief drawback to this statistic is the questionable validity of weekly earnings. Also, we do not have standardized (i.e., constant) dollar figures for earnings at referral, since referral times vary within any given closure cohort.

In order to overcome the first methodological weakness, we strongly recommend efforts toward instituting an annual SSA data link. Hopefully, by using the data link we can overcome the validity problem (i.e., weekly vs. yearly figures), since we get a longer-term assessment of earnings potential pre- and post-VR. Also, presumably, the data would be more reliable (i.e., more accurate).

The form and data sources for this data element are as follows:

$$\frac{\text{Mean annual earnings of 26 closures year following closure}}{\text{Mean annual earnings of 26 closures year preceding referral}}$$

or

$$\frac{\text{Mean weekly earnings of 26 closures at closure}}{\text{Mean weekly earnings of 26 closures at referral}}$$

Data Source	Data Item Identification
SSA Data Link Not Available	Preferred approach
Follow-up Survey	Select for 26; Earnings year since closure
Revised RSA-300	Select for 26 (Part 3.N.2): Earnings year prior to referral
RSA-300	Select for 26 (Part 3.N.2.): Weekly earnings at closure
RSA-300	Select for 26 (Part 3.N.2.): Weekly earnings at referral

Reviewers' comments regarding this data element indicate that it is appropriate in concept but unworkable in practice :

- This data element is most appropriate given the definition of Standard 4.
- This data element is a good measure of client gain. It compensates for the bias in 4 (i) and 4 (ii) toward expending a disproportionate share of VR resources on higher functioning and higher potential clients.

- We should distinguish cases by training, physical restoration, long term cases.
- We should compare weekly earnings pre- and post-VR, rather than annual earnings, because in some cases the latter will involve comparing pre-disability wages with post-closure wages.
- This data element has a built-in bias as clients are virtually unemployed at referral, and large gains in earnings at closure would naturally be expected.
- The data element does not adjust for inflation.
- Counselors would have difficulty collecting the required data.
- SSA Data Link limitations: SSA records payroll contributions on a quarterly basis. Actual earnings, full-time or part-time status, and employment during a full or partial quarter could not be determined.

Many of these points are valid. For example, we might expect training cases to show a higher earnings gain than physical restoration cases. Also, the element, as noted earlier, does not adjust for inflation. The comparison of weekly earnings founders on the fact that very few clients are employed at referral. To say that their earnings are higher at closure is almost trivial. At the other extreme, use of annual earnings underestimates the impact of VR by comparing earnings at closure to earnings prior to disability in many cases. The true impact of VR can be measured only through reference to post-disability, pre-referral earnings, which represent the "best" that a disabled client can do on his/her own. Unfortunately, estimates of post-disability, pre-referral earnings must be made on an individual basis -- an enormously complex task. While development of these estimates may be desirable, it would entail considerable effort and, once implemented, would require complex computer programming to correctly represent each client's individual circumstances.

These methodological problems are, in our opinion, not sufficient in-and-of themselves to warrant deletion of the data element from the standards. For one, this is one of the few data elements which attempts to measure client change pre- versus post-VR. Such a measure is needed for a program which purports to improve the functioning or well-being of its clients. Furthermore, according to administrative staff interviewed during the pretest, this data element is currently used in some states as an evaluation statistic (using R-300 data). Thus, the data element appears to have utility for state managers, despite its methodological problems.

Despite these positive points, we do perceive an issue with regard to this data element when seen in the context of its standard. Specifically, we have changed the focus of the standard from one of (maximal) increase in economic independence to one of ensuring that clients achieve at least minimal economic independence. While we still wish to maintain a concern for measuring client change, to do so in the context of this standard would be inappropriate. For this reason we would recommend that the data element be removed from the standard, and that a variant of this data element be used in a new standard (discussed later) which mandates that rehabilitated clients shall evidence change in terms of vocational and/or functional improvement.

Recommendation

Remove data element 4 (iii) from Standard 4 and use a variation of the data element in a new standard on client change.

DATA ELEMENT 4(iv): COMPARISON OF 26 CLOSURES WITH PUBLIC ASSISTANCE AS PRIMARY SOURCE OF SUPPORT BEFORE AND AFTER VR SERVICES

This data element addresses a question central to the meaning of gainful employment. Many VR clients will have relied on public assistance for their primary source of support at referral. Even if a client gets a job at closure, the question remains: do job earnings that do not allow a client to be free from other forms of financial support, such as welfare, really constitute gainful employment? If an individual is able, through rehabilitation services, to require less public assistance, this indicates movement toward economic independence.

The focus of this particular data element is actually on a program level: if there are fewer clients receiving public assistance at closure than at referral, there is the indication that the economic independence of the group has been increased.

The data element takes the following form:

$$\frac{\text{\# 26 closures with public assistance as primary source of support at closure}}{\text{\# 26 closures with public assistance as primary source of support at referral}}$$

Data Source	Data Item Identification
Revised RSA-300	Select for 26 (Part 3.N.2.); An individual's primary source of support is simply his/her largest source, even it it is less than 50% (R-300 definition); Public assistance = SSA, AFDC, SSDI, or public institution.
or	
Closure Survey	Select for 26
RSA-300	Select for 26 (Part 3.N.2.)

The comments below indicate the variety of reactions to this data element.

- This seems like a fairly good measure when applied to program effectiveness with regard to disabled public assistance recipients.
- A good figure to give to legislators.
- Obtaining timely and accurate public assistance data is a problem.
- Data are fraught with error.
- The approach is inaccurate, unsound and unreliable. Drop it.

- This data element tells you the least amount of information.
- Data element must be changed. The percent of clients receiving PA should increase by the time this cohort of clients leaves VR.
- Delay data collection to the follow-up survey and do not include SSI or SSDI in public assistance.
- Data element (iv) should be omitted because:
    - -- the closure survey or revised RSA-300 would not necessarily yield hard data on public assistance; this could only be obtained from SSA Data Link which is not yet in place.
    - -- The required use of similar benefits may result in higher percentage of clients receiving public assistance at closure.

This data element has an inherent problem. All the other data elements are constructed so as to place a positive value on things which are considered to be beneficial (although not always possible) for all clients. This is not true in the case of public assistance at closure. In some cases, decreased public assistance reflects the client's greater self-reliance and is therefore an indirect measure of gains achieved through VR. In other cases, an increase in public assistance occurs when a client, through the intervention of a VR agency, receives that to which he/she has always been entitled. A decrease in public assistance would, in this case, be a detriment to the client and a failure on the part of the agency.

Recommendation

Given the fact that this data element cannot be interpreted consistently, we recommend that it be deleted from Standard 4.

FINDINGS FROM THE PRETEST DATA

Table 11 presents the results of the analysis of the pretest data for Standard 4. Data for this analysis were obtained from a variety of sources including RSA-300, the revised RSA-300, the U. S. Bureau of Labor Statistics, and the Statistical Abstract of U. S. The first alternative measure for data element 4 (iii) was not included in this analysis because VR clients in this sample did not have both pieces of information necessary to compute the measure. While it is possible to do simulations using earnings for the year post-closure for the follow-up sample, and using the year prior to referral for the A and B sample, we have chosen not to. Such a finding might be misleading given the different sample of clients for the numerator and the denominator.

This table shows how a given state agency can appear more or less "successful" depending on the particular data element under consideration. This bias is especially well illustrated by the cases of Michigan and Mississippi Blind. Note that Michigan -- a high wage, industrial state -- registers the highest proportion of clients earning the weekly minimum wage among the six MEU's; however, precisely because it is a high wage state, it registers one of the lowest figures for mean closure wages in relation to mean state wages (data element 4 (ii)). In contrast, Mississippi -- a low wage, generally non-industrial state -- registers the lowest proportion of clients earning the weekly minimum wage. Yet its 26 closures have one of the highest client-state earnings ratios. These different assessments of state performance, generated by different data elements, would need to be synthesized when making an "overall" assessment of performance.

Table 11

Statistics for Standard 4

Data Element	Equation	State VA	PA	MI	DE	OR	MS BLIND
4i	$\dfrac{\text{\# 26 closures with weekly earnings}^{1}\text{ at/above the Federal minimum wage}^{2}}{\text{\# 26 closures}}$	60%	58%	79%	55.1%	72%	34.1%
4ii	$\dfrac{\text{Mean weekly earnings of competitively employed 26 closures}}{\text{Mean weekly earnings of employees in state}^{3}}$	.63	.54	.44	.42	.59	.60
4iii	$\dfrac{\text{Mean annual earnings of 26 closures year following closure}^{4}}{\text{Mean annual earnings of 26 closures year preceding referral}^{4}}$	--	--	--	--	--	--
	$\dfrac{\text{Mean weekly earnings of 26 closures at closure}^{1}}{\text{Mean weekly earnings of 26 closures at referral}^{1}}$	5.31	3.04	5.76	5.84	7.54	2.19
4iv	$\dfrac{\text{\% 26 closures with public assistance as primary source of support at closure}^{5}}{\text{\% 26 closures with public assistance as primary source of support at referral}^{1}}$	.44	.11	.36	.38	.20	.93

Data Sources:
1 RSA-300
2 Statistical Abstract of U.S.
3 U. S. Bureau of Labor Statistics, Vol. 26, #5
4 Ratio cannot be computed with pretest data
5 Revised RSA-300

STANDARD 5: THERE SHALL BE MAXIMUM PLACEMENT OF REHABILITATED CLIENTS INTO COMPETITIVE EMPLOYMENT. NON-COMPETITIVE CLOSURES SHALL BE IN ACCORDANCE WITH THE IWRP GOAL AND SHALL REPRESENT AN IMPROVEMENT IN GAINFUL ACTIVITY FOR THE CLIENT.

Data Elements:
(i) Percent 26 closures competitively employed
(ii) Percent 26 closures with hourly earning at/above federal minimum wage
(iii) Percent 26 closures with competitive outcome or with non-competitive outcome and non-competitive goal
(iv) Percent non-competitively employed 26 closures showing improvement in gainful activity

Like Standard 4, this standard concerns the quality of closures obtained by VR agencies. Historically, competitive employment has been seen as the best kind of closure. However, competitive employment may not be the appropriate placement for all clients. Still, VR regulations require that any placement of a successfully closed client be into "gainful and suitable employment,"[1] "consistent with his/her capacities,"[2] whether in competitive, sheltered, or non-competitive employment.

Given these requirements, we have tried to incorporate several concepts into Standard 5. Before discussing the data elements in detail, we present an overview of the concepts, the general focus of which is on gainful employment; thus, the data elements measure the following:

1) the extent of competitive employment closures, since competitive employment still can be seen as the best type of closure;

2) the extent to which 26 closures earn the hourly minimum wage, as an indicator of minimum standards for gainful employment;

3) the extent of "goal-switching" (i.e., going from an IWRP goal for competitive employment to closure in non-competitive

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[1] *Rehabilitation Act of 1973*, Section 302 (b) (2) (B).

[2] Federal Register, "Implementation Provisions," 1361, 1 (bb), November 25, 1974.

employment), with the concern that non-competitive closures shall not be used as a "dumping ground" for unsuccessful clients; and

4) the extent to which non-competitive closures have obtained some benefit from participation in VR.

To reiterate, this standard is concerned with the quality of closure, as evidenced by increases in gainful activity whether of a paying nature or not. Competitive employment is seen as the highest form of gainful activity; however, allowance is made for the need to make some non-competitive closures. Still, in those cases, VR is to ensure that the following have occurred:

1) the non-competitive goal was planned in advance, rather than chosen "de facto," and

2) some benefits in terms of gainful activity were obtained, even if not of a vocational nature.

The following is a summary of the comments offered concerning Standard 5:

- Standard is worthy, but getting reliable data for data element (iii) and data element (iv) will be difficult;
- "Improvement in gainful activity" is based on subjective judgment;
- If closure must be evaluated on case-by-case basis, how will their data be "pulled together" for reporting purposes?
- Standard reflects bias toward rehabilitation into competitive employment;
- While this is a worthwhile goal, it overlaps part of Standard 4 and the two overlapping parts should be collapsed into a single Standard.

This Standard's bias toward competitive employment is both deliberate and appropriate. It reflects the belief that vocational rehabilitation should focus on employment, preferably competitive employment. At the same time, the Standard acknowledges that competitive employment is not always possible. In the latter case, the client may reasonably expect some improvement in gainful activity as a result of VR. That this improvement is measured in subjective terms poses some data problems, but it does not disqualify such improvements from consideration. (The specific data problems are discussed under data element 5(iv).)

Recommendations

There is a single recommendation for Standard 5.

- Eliminate the words "...shall be in accordance with IWRP goals..." from the Standard. This reflects the fact that IWRP goals can, and at times should be, changed to reflect the progress of the rehabilitation effort. This will encourage clients and counselors alike to aspire towards a competitive outcome even when the original IWRP goal was non-competitive. Further, it should remove any incentive to set non-competitive goals in the original IWRP.

DATA ELEMENT 5 (i): PERCENT 26 CLOSURES COMPETITIVELY EMPLOYED

For a standard emphasizing maximum placement into competitive employment, perhaps the most obvious data element is to count how many are so placed. This data element is a simple, straightforward measure of degree of success in placing closures in competitive employment and could be easily implemented as the data are readily and currently available from the R-300. The form and data sources are as follows:

$$\frac{\text{\# competitively employed 26 closures}}{\text{\# 26 closures}} \times 100$$

Data Source	Data Item Identification
RSA-300	Select for 26 (Part 3.N.2.): Competitive work status at closure
RSA-300	26 closures

This data element evoked relatively few criticisms from the reviewers:

- We should compare blind clients to other blind, and general to general.
- We might want to break down competitive employment into full-time and part-time employment.
- Coding is the only source of reporting. This could be fraught with error.
- Otherwise, there was general agreement that this is a good measure and should be kept.

The suggestion that special consideration be given to the blind is a more specific version of the previously discussed suggestion to take into account the proportion of severe disabilities. The addition of a "percent severe" data element (see Standard 1) should resolve this problem. Dividing competitive employment into full-time and part-time employment is complicated and unnecessary. It adds virtually no new information, and the variation in hours worked is already taken into consideration in other data elements. Finally, while it is true that coding could be a source of error, it can be effectively minimized by monitoring, double-checking, and other forms of quality control. This should occur as a matter of course.

Recommendations

We recommend that this data element be retained as it is.

DATA ELEMENT 5 (ii) PERCENT 26 CLOSURES WITH HOURLY EARNINGS AT/ABOVE FEDERAL MINIMUM WAGE

This data element applies more stringent criteria to the measurement of "maximum placement of rehabilitated clients into competitive employment." It compares the number of 26 closures with hourly earnings at or above the federal minimum wage to the total number of 26 closures. As in data element 4(i), this data element implies that a disabled person in the competitive labor market should be expected to earn at least the federal minimum wage. Unlike 4(i) however, this measure represents an employee's worth to the employer. Total weekly earnings are an indication of an employee's financial well-being, while his/her "worth" may be determined by examining his/her hourly wage. Thus, this data element provides a measure of the "value" of rehabilitated VR clients who are in the competitive labor market relative to the federal minimum wage. The form and data sources are as follows:

$$\boxed{\frac{\text{\#26 closures with hourly earnings at/above federal minimum wage}}{\text{\# 26 closures}} \times 100}$$

Data Source	Data Item Identification
Revised RSA-300 Statistical Abstract of U.S.	Select for 26 (Part 3.N.2.); Weekly earnings at closure divided by hours worked at closure
RSA-300	26 closures

The following issues were raised in regard to data element 5(ii):

- Federal minimum wage is a good base.
- If a client earns less than minimum wage, it is almost always non-competitive employment; therefore, 5 (ii) is virtually identical to 5 (i).
- We believe it unfair to pay undue attention to non-competitive closures, since they are legal and have not been given such second class designation in the regulations. Therefore, we recommend that (ii) be deleted.
- This is an important data element but, under this Standard, it seems to imply that competitive employment is defined as employment remunerated at/above minimum wage. This is often not the case.
- Many clients are closed status 26 in sheltered workshops that have special certification to hire below minimum wage.
- Comparisons of client earnings with federal minimum wage could result in a disincentive with respect to serving rural populations. This is because the payoff might be perceived as being better for dedicating resources to clients in urban areas, where wage levels and therefore earnings at closure are much higher than in economically depressed rural areas.

These comments point out the presence of some flaws in this data element. In particular, the implied definition of competitive employment as being at/above the minimum wage causes problems. In some states, this definition is often inaccurate, while in other states, the fact that the definition is accurate makes this data element redundant with data element 5(i). The stated concern about a disincentive to serving rural populations, although not critical in itself, does lend weight to the argument for deleting this data element.

However, with some modification this data element could prove more useful as an evaluation statistic. Specifically, we propose that the data element be computed for competitively employed closures only. In this way, the data element more closely addresses the concern of the standard: it becomes a measure of the quality of competitive employment closures. Although occupations paying less than the minimum wage are "almost always" non-competitive, it does not follow that all competitive employment closures pay the minimum wage. The task, then, becomes one of determining the proportion of competitive employment closures which fail to earn the minimum wage.

Recommendation

Modify the data element to be computed over competitive employment closures only.

DATA ELEMENT 5(iii): PERCENT 26 CLOSURES WITH COMPETITIVE OUTCOME OR WITH NON-COMPETITIVE GOAL AND NON-COMPETITIVE OUTCOME

Competitive employment may not be the appropriate placement for all clients. Nevertheless, VR regulations require that all placements be into "gainful activity" and that placements be consistent with the clients' "capacities and abilities," whether in competitive, sheltered, or non-competitive employment.

There is much speculation in the field over the abuse of "homemaker" and "unpaid family worker" categories, specifically regarding the use of these categories to ensure success rather than because the placement is appropriate. While maximizing the proportion of successful closures (as in 3(i)) is important to the purpose of VR, it does not ensure that non-competitive placements are suitable for the client. This data element addresses the concern that non-competitive closure categories not be used to salvage "successes" for clients who were unsuccessful in their planned competitive goals. The form and data sources are as follows:

# of 26 closures who have:
(a) competitive goal and competitive outcome
(b) non-competitive goal but competitive outcome
(c) non-competitive goal and non-competitive outcome
that is, excluding
(d) competitive goal but non-competitive outcome
# 26 closures X 100

Data Source	Data Item Identification
Revised RSA-300	Select for 26 (Part 3.N.2.); Work status of original IWRP goal; Competitive work status at closure; Non-competitive work status at closure = sheltered workshop employees, BEP employees, homemakers, unpaid family workers
Revised RSA-300	26 closures

The following is a summary of the comments offered concerning data element (iii):

- This seems like a good measure of program effectiveness.
- Appears difficult to calculate. Will the information obtained be that helpful?
- It overlooks the fact that vocational goals frequently change as the IWRP progresses. Counselors would have an additional form to complete.
- Counselors say they often put the goal just out of reach, then change it after seeing what happens in training.

- Which IWRP goal is intended? The original or the final amendment?
- Why not compare work status at referral to work status at closure?
- Data element has no statistical value since all states are over 90%.
- Not really useful for getting money out of foundation.
- Better left to a process/case review standard. Delete.

The major problem with this data element involves the possible misapplication of the IWRP process. The IWRP is intended to be a statement of a realistically attainable goal which, if necessary, can be modified for a variety of valid reasons as the client progresses through the VR process. That is, the IWRP serves as a guideline rather than as a hard and fast rule.

Data element 5(iii) reflects a concern that the counselor and client make a conscientious effort to adhere to the guidelines of the IWRP. Unfortunately, that is not the effect of the data element. The inclusion of this statistic in the Standards overemphasizes the importance of matching the outcome to the goal. As such, it is a disincentive to setting ambitious (i.e., competitive employment) goals in the original IWRP, and it also reduces the flexibility of the counselor in refining the goal during rehabilitation.

Recommendations

This data element reflects a legitimate concern about the VR process (i.e., the concern for quality planning and client assessment), but it is not useful as an evaluation statistic. Consequently, we recommend that it be deleted from the Performance Standards and that the underlying concept be addressed through a Procedural Standard.

DATA ELEMENT 5 (iv): PERCENT NON-COMPETITIVELY EMPLOYED 26 CLOSURES SHOWING IMPROVEMENT IN GAINFUL ACTIVITY.

As stated earlier, closures into non-competitive employment may be legitimate for certain clients. Nonetheless, if VR is to claim any credit for "rehabilitating" clients into non-competitive employment, then there must be some indication that VR helped improve those clients' capacity for gainful activity. If the client obtained no benefits whatsoever from VR, then VR has essentially wasted money and time. Obviously, such outcomes are not desirable.

This data element takes a subjective approach to the problem of assessing the legitimacy and appropriateness of non-competitive closures. It is computed by taking the percent of non-competitively employed 26-closures who state they have done any of the following: improved their self-care abilities and thus freed other family members to join the labor force; experienced improvement in any self-care or homemaker-related functions; experienced improvement in job-related skills; or had "improvements" in attitude. This wide range of indicators assesses the extent to which non-competitive closures benefit as a result of intervention. The form and and data sources for this data element are as follows:

$$\frac{\text{\# non-competitively employed 26 closures showing improvement in gainful activity}}{\text{\# non-competitively employed 26 closures surveyed at closure}} \times 100$$

Data Source	Data Item Identification
Closure Survey	Non-competitive work status at closure = same as 5(iii); Gainful activity = release of other family members for labor force, attitude changes, aspects of self-care, homemaking skills, job-related skills
Closure Survey	Select for non-competitively employed 26 closures, defined as for 5(iii)

The criticisms of this data element generally focused on the validity of the data:

- We like the fact that non-competitive employment was addressed, but measurement right now is poor.
- This data element has all the problems associated with self-reported information.
- How do you determine improvement in gainful activity? There are numerous questions on the survey, and only one improvement is needed for the client to be included in the numerator.
- This ought to be thrown out because it's difficult to define and measure in a way that allows for meaningful interstate comparison.
- Substitute Walker Associates Degree of Improvement on Independent Living Scales.

We feel that the concept embodied in this standard is very important, in that it allows assessments of achievement of gainful activity for non-competitive closures. However, rather than attempt to impose the original instrument on states at this time, BPA recommends substituting those elements of the Functional Assessment Inventory (FAI) and the Life Status Indicators (LSI) which will soon be pretested for inclusion in the MIS. The FAI and LSI have been identified by RSA's MIS Work Group as having potential for providing valid and reliable measures of independent living status and functional abilities. The exact data elements, however, cannot be specified until after the FAI/LSI pretest. Until that time, performance on this data element should not be reported.

Recommendation

Modify the data collection methodology to use the FAI and LSI components which are ultimately chosen for inclusion in the MIS.

FINDINGS FROM THE PRETEST DATA

Table 12 represents the pretest findings for Standard 5. The data actually provides a further rationale for removing data element 5 (iii) from the Performance Standards. Specifically, no state achieved lower than a 90% "success" rate on the data element. Because a 90% success rate would be an acceptable minimum cut-off point for performance on this data element, there is no need for a specific performance standard to measure an aspect of program functioning which all states consistently achieve. For this reason, we have recommended that this element be added to the Procedural Standards which will be systematically reviewed less frequently than the Performance Standards.

Table 12

Statistics for Standard 5

Data Element	Equation	State					
		VA	PA	MI	DE	OR	MS BLIND
5i	# competitively employed 26 closures[1] ——— #26 closures[1]	74%	73.3%	94.9%	85.5%	82.7%	42.2%
5ii	#26 closures with hourly earnings[2] at/above federal minimum wage[3] ——— #26 closures[1]	56%	52%	91%	53.9%	71%	52.2%
5iii	#26 closures with[2]: a) competitive goal and competitive outcome b) non-competitive goal but competitive outcome c) non-competitive goal and non-competitive outcome ——— #26 closures[2]	90.5	97%	99.6%	93.9%	92.7%	93.1%
5iv	# non-competitively employed 26 closures showing improvement in gainful activity[3] ——— # non-competitively employed 26 closures surveyed at closure[3]	87.8% (N=49)	45.0% (N=80)	64.3% (N=14)	84.6% (N=13)	93.5% (N=31)	91.2% (N=34)

Data Sources:
1 RSA-300
2 Revised RSA-300
3 Closure Survey

STANDARD 6: VOCATIONAL GAINS SHALL BE ATTRIBUTABLE TO VR SERVICES.

Data Element: Comparison of earnings change from referral to closure of 26 closures to earnings change of a control group

The intent of this standard is to provide a measure of VR's effectiveness in its attempt to rehabilitate clients; that is, to measure the extent of a causal relationship between the VR services provided and the outcome or vocational gain. Research has indicated that some vocational gain may occur independent of the provision of VR services. Studies suggest that both clients of VR and non-clients will show, over the same time period, increased earnings, increased levels of skill, and other vocational gains. This standard is justified in order to demonstrate whether vocational gains can be directly and accurately attributed to the provision of VR services.

Given the intent of the standard, we feel that it fits in well with two of the three basic RSA goals. The relation between the standard and the goals is derived from the need to establish a prior condition. Clients may or may not experience vocational gain after participating in VR services. But even if they do, the question remains: was VR in any way responsible for that gain? If the activities of VR on behalf of the client had little or nothing to do with the gain, then the quality of the service (in terms of planning, prescription of appropriate services, and effectiveness of service provision) should be called into question. This standard is similarly tied to the cost effectiveness goal: if VR is responsible, then it has been (and can claim it is) cost-effective. Otherwise, VR has wasted money and effort, regardless of the outcome actually achieved by the client.

Data Element 6 (i)

a. $$\frac{\text{(Average change in earnings for 26 closures)} - \text{(average change in earnings for 28 + 30 closures)}}{\text{Average change in earnings for 26 closures}}$$

b. $$\frac{\text{(Average change in earnings for 26 closures)} - \text{(average change in earnings for 28 closures)}}{\text{Average change in earnings for 26 closures}}$$

c. $$\frac{\text{(Average post-closure earnings for 26 closures)} - \text{(average pre-referral earnings for 10s, accepted clients)}}{\text{Average post-closure earnings for 26 closures}}$$

Method	Data Source	Data Item Identification
a.	SSA Data Link (Not Available)	Select for 26, 28, and 30; Preferred approach
or	Follow-up Survey	Select for 26, 28, and 30; Earnings year following closure
	Revised RSA-300	Select for 26, 28, and 30; Earnings year prior to referral
or	RSA-300	Select for 26, 28, and 30; Earnings at closure; Earnings at referral
b.	SSA Data Link (Not Available)	Select for 26 and 28; Preferred approach
or	Follow-up Survey	Select for 26 and 28; Earnings year following closure
	Revised RSA-300	Select for 26 and 28: Earnings year prior to referral
or	RSA-300	Select for 26 and 28; Earnings at closure; Earnings at referral
c.	SSA Data Link (Not Available)	Select for 26 and 10
or	Follow-up survey	Select for 26; Earnings year following closure
	Revised R-300	Select for 10; Earnings year prior to referral

Given the nature of this standard, a control group comparison is required. The difficulty involves the selection of a suitable quasi-control group given the infeasibility of the random assignment of clients to services. Three variations were proposed. Two of the data elements propose using accepted, but unsuccessful clients as the quasi-control group. They use wage changes of unsuccessful closures as a baseline to ascertaining the extent of "unique" wage gain for 26 closures (i.e., the proportion of wage gain attributable to successful completion of VR services). The third data element uses the clients entering status 10 during the current reporting year as the quasi-control group. Their pre-referral earnings are compared to the post-closure earnings of 26 closures.

The criticisms of reviewers focused on the data element rather than the Standard:

- This data element concentrates on financial gain and ignores other aspects of vocational gain. Increased earnings is only one aspect of vocational gain. It is often not the most important.

- Aside from the fact that "earnings change" is a poor measure to begin with, one can also question whether 28 and 30 closures comprise an appropriate comparison group. In some states, 28's and 30's by definition do not have earnings at closure (i.e., anyone with earnings is closed 26.) In others, counselors don't know earnings at closure for 28's and 30's because these clients simply don't show up (i.e., they are "lost").

- We recommend that the third measure (comparing 26's to 10's) be used. It should yield a more reliable index of this Standard.

- The concept is good, but the data element is not. Perhaps the sought-for causal influences can only be established through controlled studies.

- Drop this Standard and obtain information with a one-time research project.

Two major issues confront this data element. First, wage gains have been proposed as a measure of vocational gains. Wages reflect neither hours worked nor hourly wage; they are simply aggregate earnings received while employed. For clients with high pay levels but lower hours worked, this measure would create a downward bias. In addition, measuring only wage gains ignores other vocational gains.

Second, as control groups, 28's and 30's are not totally comparable to 26's. The 28's receive some services but fail to achieve rehabilitation. They presumably are thus more difficult cases to rehabilitate than 26's, and the difference between their post-closure wages and those of 26's may lead to overestimating benefits of 26's attributable to VR services. (In short, the 28's would be likely to fare worse than a true control group of 26's without services.)

The 30's involve a client population which often drops out because of client lack of interest in VR program participation. Manpower studies have shown that early drop-outs are not necessarily poorly motivated, but rather are often highly motivated clients who perceive they can make it on their own and don't want to waste time in manpower training. Thus, 30's may be a client population with better prospects than a true control group of 26's without services, and the difference between their post-closure wages and those of 26's may underestimate the true benefits of VR services.

A control group of a client population accepted for services (Status 10) the same year 26 closures are terminating VR services has a number of advantages. There are far more clients in Status 10 than there are in Statuses 28 and 30. Also, comparing similar years' earnings between the two groups eliminates the need for inflation and labor market adjustments. There are problems, however, with comparing 26's to 10's. In general, the latter group have been disabled more recently than the former. They have had less time to adjust to a critical change in their lives. A second problem is that Status 10 includes clients who eventually may be closed in any one of the three statuses (26, 28 or 30.) Thus, even Status 10 clients do not constitute a suitable comparison group.

Summary and Recommendations

While the concept embodied in the standard is important and appropriate as an evaluation concern, measurement of the concept is very difficult. Ideally, we would want to establish objectively, on an individual client basis, that VR program intervention was responsible for the gains made by clients. Unfortunately, the inadequacy of the comparison groups as controls prevents us from making conclusive statements concerning causality. These problems render the data element useless both for evaluation and for management.

Despite the critical flaws in the data element, the Standard itself reflects a principle important for any evaluation of VR. Consequently, we recommend the following:

- This data element should be eliminated.
- This Standard should be removed from the performance standards, and the mandate for establishing causality should be fulfilled through periodic controlled research studies of clients on a national level.

With this change, we eliminate from the standards an unsuccessful attempt to attribute vocational gains to VR services. We suggest that such causal analysis is better done in special studies. However, we still wish to measure vocational and other gains of clients made during VR services, to allow description of that positive change which has occurred. Given this, we recommend that the "causality" standard be replaced by a "client change" standard, with appropriate associated data elements. Thus the new Standard 6 will read as follows:

STANDARD 6: REHABILITATED CLIENTS SHALL EVIDENCE VOCATIONAL GAINS

Ultimately, the data elements for this standard should measure both vocational and non-vocational changes which might accrue to rehabilitated clients. However, in the short-term we restrict ourselves to vocational measures; in particular, to earnings measures. We recommend using the average pre-post earnings change for rehabilitated clients. This is equivalent to an equation of the form:

Data Element 6 (i) (new):

$$\frac{\left\{\begin{array}{l}\text{Sum of closure earnings}\\ \text{for 26 closures}\end{array}\right\} - \left\{\begin{array}{l}\text{Sum of referral earnings}\\ \text{for 26 closures}\end{array}\right\}}{\#26\text{ closures}}$$

The data sources would be as follows:

Sum of closure earnings	R-300, Item 3J (Sum for all 26 closures)
Sum of referral earnings	R-300, Item 2P (Sum for all 26 closures)
#26 closures	R-300, Item 3N2 (Total number)

We recommend using R-300 data to compute this data element. We discussed the problems with R-300 data (primarily, the validity of weekly earnings figures) under data element 4 (iii).[1] Despite these problems, R-300 data remains the most attractive alternative until an annual SSA data link is established.

This data element is very similar to data element 4 (iii), which we have recommended for deletion from Standard 4. The major distinctions between the two are that the new data element 6 (i) provides an average of individual, raw dollar earnings changes, while 4 (iii) provides a ratio expressed in terms of a percentage change.

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[1] See pages 106 and 107.

We do not at this time have any recommendations for specific data elements to measure non-vocational change. As with the data elements associated with non-competitive employment closures (as in data element 5 (iv)),the methodology for assessing non-vocational change needs development. This development should occur as an outgrowth of the FAI/LSI pretest for the MIS. Until such time as the measures can be developed, no data collection or reporting will be conducted for this data element.

FINDINGS FROM THE PRETEST DATA

Table 13 presents the results of the analysis of pretest data for Standard 6. Data element 6(i) attempts to represent a causal relationship between VR service delivery and client outcome by comparing the net earnings gain of 26 closures to that of 28 and 30 closures, and to 28's alone. In both cases, the interpretation of the statistic is the proportion of 26 closures' earnings gain that can be attributed to VR services. However, a glance at Table 13 reveals that, for both measurements, most states achieved a proportion in excess of 1.00 (due to negative earnings change for unsuccessful closures). This, of course, makes no sense conceptually, and it constitutes an additional argument for eliminating data element 6(i).

Table 13

Statistics for Standard 6

Data Element	Equation	State					
		VA	PA	MI	DE	OR	MS BLIND
6i	$\frac{\text{(average change in earnings for 26 closures) - (average change in earnings for 28 \& 30 closures}}{\text{(average change in earnings for 26 closures)}}$	1.10	1.13	.95	1.00	1.02	1.20
	$\frac{\text{(average change in earnings for 26 closures) - (average change in earnings for 28 closures)}}{\text{(average change in earnings for 26 closures)}}$	1.10	1.13	1.00	1.05	1.02	1.32

Data Source: RSA-300
Closure Survey

STANDARD 7: REHABILITATED CLIENTS SHALL RETAIN THE BENEFITS OF VR SERVICES

Data Elements: (i) Percent 26 closures retaining earnings at follow-up

(ii) Comparison of 26 closures with public assistance as primary source of support at closure and at follow-up

(iii) Percent non-competitively employed 26 closures retaining closure skills at follow-up

Retention of benefits gained through vocational rehabilitation services is important to the rehabilitated client and as a measure of overall program effectiveness. Job losses following successful closure imply program failure and point to incongruence of program goals vis-a-vis individual client goals. Are we "rehabilitating" clients temporarily to meet program objectives, then finding clients back where they started a few months later? This question has a great degree of importance to the overall VR mission and thus a standard in this area is highly appropriate. Aside from employment measures of benefit retention, additional attention is given to expanding the data elements for this standard to include non-employment measures.

This standard embodies another of the concepts related to quality service in the VR program. In the ideal setting, successfully closed clients would be permanently rehabilitated. The theory, of course, is that if quality services are provided, clients will retain the ability to function in a job and to compete in the labor market. The manifestations of those abilities are that clients do in fact retain their jobs, or some job. Of course, it is not always possible to retain jobs (or earnings levels), regardless of the quality of services provided by VR. Clients may suffer from unanticipated relapses or complications of their disabling handicaps, which can cause clients to lose their employment capabilities temporarily or permanently. Alternatively, clients can be laid off from jobs due to macro-economic conditions, regardless of the quality of VR services. Nonetheless, in general we would expect clients to retain benefits. The standard is appropriate for inclusion in the overall standards system.

The following is a summary of comments offered concerning Standard 7.

- While we certainly support the idea of measuring retention of benefits, we question the implication that "recidivism" necessarily implies "program failure." The whole notion of "post-employment services" is based on the fact that certain individuals need and are entitled to repeated contacts with the VR agency over time.
- Retention of benefits is important for evaluation, but it must be tied into a study of why retention occurs and what benefits are retained.
- It is important that benefits gained through VR services be demonstrated before their retention is measured.

Standard 7 does not measure recidivism. It measures instead the retention of the skills attained at closure. A client who has retained those skills (e.g., a job) while maintaining contact with the VR agency (e.g., for post-employment services) is not counted as a program failure. A failure occurs when a client loses part or all of the benefits and skills acquired during rehabilitation, regardless of any post-closure contact with the agency. Further, the fact of provision or non-provision of post-employment services will be taken into consideration during the supportive evaluation.

Recommendation

Standard 7 should be retained in its present form.

DATA ELEMENT 7 (i): PERCENT 26 CLOSURES RETAINING EARNINGS AT FOLLOW-UP

Since the achievement of "gainful activity" is the basic goal for the VR client, a simple measure of the retention of that benefit is the client's continued employment. However, this data element tightens the criterion to consider retention of the client's economic welfare level at closure. The data for such a measure would be available through follow-up inquiry. The denominator includes only those clients working at closure, on the theory that these are the clients who had "benefits" from

VR that need to be "retained." Unfortunately, the element excludes those clients whose employment capabilities were enhanced by participation in VR and who may obtain jobs at some point after closure -- thanks to VR's intervention -- but who had no earnings at closure.

Earnings at closure and post-closure could be compared in several ways, including changes in earnings summed for all working clients between the two periods, or an average percentage change for individual clients across the two periods. The data element may need adjustment for differences between successive periods to account for inflation. However, a simple "increase-decrease-stable" measure of individual clients (aggregated) avoids some of these problems. Ideally, data for the comparisons could rely on the SSA data link to enhance data quality. The form of data element 7(i) and the sources of data are shown below:

$$\boxed{\frac{\text{\# 26 closures with earnings at closure who retained or increased earnings at follow-up (1 year)}}{\text{\# 26 closures with earnings at closure examined at follow-up}} \times 100}$$

Data Source	Data Item Identification
SSA Data Link (Not Available)	Preferred approach
Follow-up Survey	Select for 26 with jobs at closure; earnings at closure and follow-up
Revised RSA-300	Select for 26 with jobs at closure, using identifying data on survey instrument

The following is a summary of comments and suggestions for this data element:

- The first two data elements under this standard address areas relevant to an evaluation of program effectiveness. Good way to measure retention of benefits.
- Sample of follow-up returns may be biased, since the more successful rehabilitants are, perhaps, more likely to be contacted and return the questionnaire.
- We recommend retention of 7 (i), but only if the data can be obtained from the SSA data link.
- The SSA data base has limitations because it records total payroll contributions on a quarterly basis. Actual earnings, and whether from full-time or part-time employment, or employment during a partial or a full quarter, are not determinable from the data base.
- Change concept behind data element to "retaining, maintaining, or working toward economic independence" to take into account job training, continuing education, etc.
- Why are we looking at number of clients instead of looking at overall earnings?
- Should correct for inflation.

It is probably true that successful clients will be over-represented in a sample based on follow-up surveys. The data element will tend to overestimate retention of benefits. However, this is not a serious problem, for two reasons. First, since the problem is common to all survey research, the bias will be consistent across states and over time. Thus, cross-state and year-to-year comparisons will not be significantly affected. Second, consistent overestimates of retention can be taken into account when setting performance levels.

The major advantage of the SSA data link is that it obviates the problem of sample bias; however, as we have said, this problem is not serious. Some disadvantages of the data link were mentioned in the comments, but the main drawback is that the data link is not available at present.

It would be inappropriate to change this data element's underlying concept to "working toward economic independence." There are other data elements (5(iv), and 7(iii)) that provide for closed clients who are not competitively employed. Data element 7(i) is, and should be, concerned with retention of benefits from said employment.

This data element is based on the number of clients rather than total earnings because the purpose of VR is not to maximize aggregate client earnings, but to help each client achieve economic independence. Using the mean earnings or overall earnings would allow a few very successful or very unsuccessful clients to pull the statistic upward or downward. Even if these effects were to cancel each other in practice (which they may not), a statistic based on a group's total earnings is not in principle a valid reflection of the intent of Standard 7.

Recommendation

Data element 7(i) should be retained in its present form.

DATA ELEMENT 7 (ii): COMPARISON OF 26 CLOSURES WITH PUBLIC ASSISTANCE AS PRIMARY SOURCE OF SUPPORT AT CLOSURE AND AT FOLLOW-UP

This data element would provide a needed dimension in assessing benefit retention for non-competitively as well as competitively placed successful closures. Here, benefits are proxied by measuring the extent of the clients' use of public resources. By focusing on the degree to which there is a reduced need for public assistance, an emphasis is given to the economic self-sufficiency of the client in terms of stability or improvement. While this represents only one dimension of the possible benefits associated with successful closure (and one less sensitive to the complete range of effects of VR services), it has a high degree of face validity as a measure of public resource burden. The form of data element 7(ii) is presented below, along with the sources of data.

$$\frac{\text{\% 26 closures with public assistance as primary source of support at follow-up (12 months)}}{\text{\% 26 closures with public assistance as primary source of support at closure}}$$

Data Source	Data Item Identification
Follow-up Survey	Select for 26; Public assistance = same as 4 (iv); Primary source of support = same as 4 (iv)
Revised RSA-300	Select for 26; Public assistance = same as 4 (iv); Primary source of support = same as 4 (iv)

The comments of reviewers did not express any disagreement with the concept of this data element. However, there was some concern about the nature of the data itself.

- Data element is satisfactory and is relevant to an evaluation of program effectiveness.
- Data element should be dropped, because it requires a special follow-up after closure.
- Follow-up survey is not likely to yield reliable data.
- There are problems collecting "primary source of support" at closure.
- Definition of public assistance needs to be tightened; exclude SSI and SSDI from "public assistance."

The fact that this data element requires a follow-up survey is not in itself a convincing argument for dropping the element. The appropriate criteria are the quantity and quality of the data, and the cost of conducting the survey. The instrument can be revised to increase the response rate and data reliability while providing at least a partial reduction in processing costs.

The major problem with data element 7(ii) is the definition and identification of the primary source of support. The "primary source" is currently defined as the largest source, even if it is less than 50%. Moreover, according to the Rehabilitation Services Manual, "In determining the largest single source, combinations of public assistance payments should be considered as one single source in making the determination". Other sources are to be considered individually, and they include several private sources: the individual's earnings, dividends, etc.; family and friends; private relief agency; and private insurance.

The foregoing definition can lead to some anomalies. For example, if a client derives 25% of his income from combinations of public assistance, and if the remaining 75% were divided evenly among the four private sources mentioned above, then public assistance would be the single largest (i.e., primary) source of support. However, if another client derives 45% of his support from public assistance and 55% from wages, his primary source would not be public assistance. This despite the fact that, in proportional terms, his public support is almost double that of the first client.

From this example we can see that if a client's primary source of support is coded as public assistance, it does not really tell us much about the extent of the client's dependence upon the government. A more consistent definition would involve determining the client's total dollar amount of public assistance and dividing this by his total dollar income from all sources (public and private). If the ratio of public assistance to total income is greater than .50, then public assistance is the primary source.

The method of identifying primary source also presents problems. The current method of making that determination -- using the counselor's decision at closure and the client's decision at follow-up -- is inherently inconsistent and unreliable. A better method would be to have the client report at closure and at follow-up his total income and his total public assistance. The counselor (or the state) could then compute the ratio of public assistance to total income. This method will require a slight modification (actually a simplification) of the follow-up instrument.

Recommendation

Data element 7(ii) should be retained; the definition of primary source of support and the method for making that determination should be altered in the manner described above.

DATA ELEMENT 7(iii): PERCENT NON-COMPETITIVELY EMPLOYED 26 CLOSURES RETAINING CLOSURE SKILLS AT FOLLOW-UP

This data element extends the concept of retention of benefits to non-competitive closures, in terms of the benefits assessed in Standard 5, data element (iv). The data element computes the percentage of all non-competitively employed clients who have maintained or improved their closure skills at follow-up. The percentage is computed in terms of the number of clients who stated they had improved on any aspect of self-care, attitudes, homemaker skills, job-related skills, or had "improved so as to release other family members to join the labor force." Like Standard 5, data element (iv), the exact methodology for deriving this data element's needed information in a consistent and reliable fashion is problematic. The state of the art is in exploratory stages and the special follow-up data collection required involves significant resources. While the data element is currently low in implementation feasibility, the measure has considerable value from a conceptual perspective. The form of data element 7(iii) and its data sources are shown below:

$$\frac{\text{\# non-competitively employed 26 closures who have maintained or improved closure skills at follow-up (1 year)}}{\text{\# non-competitively employed 26 closures examined at follow-up}} \times 100$$

Data Source	Data Item Identification
Follow-up Survey	Non-competitive work status = same as 5 (iii); Closure skills = same as gainful activity defined in 5 (iv)
Follow-up Survey	Select for non-competitively employed 26 closures, using identifying data on survey instrument

Reviewers' concerns with data element 7(iii) focused on the problems involved with measurement:

- The difficulty of defining what constitutes improved closure skills make the measurement of this variable problematic. Also, it has the traditional problems of validity of self-reported data.
- The nature of the data requires a special follow-up after closure. An enormous sample will be needed because of the low proportion of non-competitive 26 closures. Who will pay for it?
- Factor analyze the survey items, and utilize the resultant subscales as indices.
- Substitute Walker Associates' Independent Living Scales.

The main problem with data element 7 (iii) is that, like data element 5 (iv), it relies on a cumbersome computation based on over 20 questions on the follow-up survey. During the data coding process, it became clear that many respondents skipped this section of the survey, either because it was too long or because they did not understand it.

Recommendation

Like data element 5 (iv), we feel that this data element is important for evaluation purposes and should be retained in the standards. We recommend that the same FAI and LSI data elements used for data element 5 (iv) be used here. However, for the purposes of this data element the FAI and LSI items will need to be modified into a form suitable for self-administration by the clients. The specific items and their forms will be determined after completion of the upcoming pretest for the MIS. Until that time, data collection for data element 7 (iii) would be deferred.

FINDINGS FROM THE PRETEST DATA

Table 14 presents the results of the analysis of the pretest data for Standard 7. Values for data element 7 (i) ranged from 24% to 77% with most states falling at the lower end of this range. Further, because these earnings at follow-up figures were not adjusted for inflation, the findings may be artificially high. In reality, it seems that most clients, for whatever reasons, have not retained the earnings gain achieved as a result of rehabilitation.

The results of data element 7(i) illustrate the concern for reliability which has been repeatedly voiced during the pretest. In all six states, approximately 5% to 10% of the sample had an increase or decrease in earnings of five dollars per week or less. While it is possible than an individual could actually incur a three dollars per week cut in salary, it is far more likely that the "loss" is a result of rounding error in the reporting of earnings. For example, a client may report his earnings at closure as "$201.85 per week" (coded as $202), and at follow-up as "about $200 per week" (coded as $200). The result of the client's approximating his earnings at one time and not at another is the appearance of an earnings loss when in fact there may have been no change, or at best a very negligible change. While our analysis is by no means conclusive, it does suggest that any earnings change of less than, say, five dollars per week should be considered "no change" for the purposes of this data element. The net effect of this change would be to uniformly raise all states' scores by a few percentage points.

The figures for data element 7(ii) range from 1.47 to 7.46, with a lower score indicating better performance. However, five of the six states had ratios of 1.90 or less. The lone outlier (Pennsylvania) illustrates the need to report the numerator and denominator along with the ratio. This state had a rather high (but not the highest) proportion of clients relying primarily on public assistance at follow-up (the numerator). However, this state had by far the lowest proportion of clients relying primarily on public assistance at closure (the denominator). If the reporting system included only the ratio, the performance of this state would indeed look quite dismal. By including the denominator, the finding offers

Table 14

Statistics for Standard 7

Data Element	Equation	State					
		VA	PA	MI	DE	OR	MS BLIND
7i	$\frac{\text{\# 26 closures with jobs at closure who retained/increased earnings at follow-up (1 year)}^{1}}{\text{\# 26 closures with jobs at closure examined at follow-up}^{1}}$	28.6%	27.6%	25.3%	24.1%	50.5%	76.9%
7ii	$\frac{\text{\% 26 closures with public assistance as primary source of support at follow-up (1 year)}^{1}}{\text{\% 26 closures with public assistance as primary source of support at closure}^{2}}$	1.90	7.46	1.72	1.88	1.68	1.47
7iii	$\frac{\text{\# non-competitively employed 26 closures who have maintained/improved closure skills at follow-up (1 year)}^{1}}{\text{\# non-competitively employed 26 closures examined at follow-up}^{1}}$	79.2% (n=24)	40.0% (n=20)	42.1% (n=19)	46.5% (n=23)	100.0% (n=3)	68.2% (n=44)

Date Sources: 1 Six Month Follow-up Survey
2 Revised RSA-300

a more informative and useful finding of the state's performance on this indicator.

Values for data element 7 (iii), which represents the percentage of all non-competitively employed clients who have maintained or improved their closure skills at follow-up, range from 40-100%. This percentage is computed in terms of the number of clients who stated they had improved on any aspect of self-care, attitudes, homemaker skills, job-related skills, or had "improved so as to release other family members to join the labor force." As noted earlier, we recommend changing the methodology used for this data element.

STANDARD 8: CLIENTS SHALL BE SATISFIED WITH THE VOCATIONAL REHABILITATION PROGRAM, AND REHABILITATED CLIENTS SHALL APPRAISE VOCATIONAL REHABILITATION SERVICES AS USEFUL IN ACHIEVING AND MAINTAINING THEIR VOCATIONAL OBJECTIVES.

Data Elements:

(i) Percent closed clients satisfied with overall VR experience

(ii) Percent closed clients satisfied with specific aspects of VR

(iii) Percent 26 closures judging services received to have been useful in obtaining their job/homemaker situation

(iv) Percent 26 closures judging services received to be useful in current performance on the job/homemaker situation

As an indicator of consumer appraisal of services, the standard on client satisfaction with vocational rehabilitation services has considerable merit. Since client satisfaction polls usually offer high degrees of support for the program, this standard is viewed as having distinct political value in lobbying for expanded financial support at both the state and federal level. There are problems, however, with using such undifferentiated measures for indicators of program effectiveness. If all, or nearly all, clients express satisfaction even though the program does not successfully rehabilitate them, this measure may tell us something about VR, but it won't tell us about the program's utility.

Complementing the political utility of a satisfaction measure is the inclusion of a client utility assessment in the standard. The intent of this clause is to ensure that successfully closed clients assess the utility of VR services positively in terms of actually having contributed to their getting a job and functioning in it. As a substantive qualification of the satisfaction standard, utility assessment offers a valuable entree for probing areas needing program improvement and for ensuring consumer involvement in improving the responsiveness ov VR services to client needs.

The comments and suggestions of reviewers were generally applicable to all four data elements as well as the Standard. They will be discussed following the descriptions of each data element.

DATA ELEMENT 8 (i): PERCENT CLOSED CLIENTS SATISFIED WITH OVERALL VR EXPERIENCE

As one of the data elements of the original nine standards, retaining overall satisfaction as a measure of program performance has several advantages: (1) the procedure is in place; (2) developmental costs have already been absorbed; (3) it constitutes a composite measure of client satisfaction which responds to legislative and consumer advocacy concerns; and (4) it is viewed as politically valuable information by the states; and (5) the data show some discrimination among closure statuses.

The disadvantages of such a measure include several aspects of the methods in which satisfaction information is currently gathered. The expenditure in time and money to launch follow-up surveys of clients by any technique is only questionably cost-effective, and can be expected to have response bias. Unsuccessful clients, who are more likely to be dissatisfied with the program, are also far less likely to be located six months to a year after closure and less likely, even when contacted, to respond to questioning. As a consequence, an already highly subjective measure suffers additional biasing. It would be possible to mitigate some of these concerns by administering satisfaction questionnaires at closure.

A further disadvantage is the ambiguous nature of the composite satisfaction question: one client's "overall experience" may really be an appraisal of his/her feelings about the counselor; another client's outcome may positively or negatively color the "overall experience." Proposed data element (ii) attempts to mitigate this problem and provide for areas of inquiry to isolate the correlates of satisfaction.

An extension of the problem of ambiguity is that of non-comparability of data across states due to differences in wording, sampling, timing, and the individual contacting the client. All of these variances create substantial and unidentified biases which could be mitigated by a consistent questionnaire and methodology provided by RSA for state use.

The form of this data element and the sources of the data are as follows:

$$\boxed{\frac{\text{\# closed clients satisfied with overall VR experience}}{\text{\# closed clients surveyed}} \times 100}$$

Data Source	Data Item Identification
Closure or Follow-up Survey	Closed clients = 08, 26, 28 and 30
Closure or Follow-up Survey	All closed clients surveyed

DATA ELEMENT 8 (ii): PERCENT CLOSED CLIENTS SATISFIED WITH SPECIFIC ASPECTS OF VR

Introduced in the original nine standards, this data element attempts to mitigate several of the failings of the composite measure in data element(i). In particular, the aspects isolated for inquiry include questions about the counselors' protection of the clients' interests, the kind and timeliness of service delivery, the results of restoration efforts, the job placement process, and the ultimate vocational attainment. Ideally, this discrete approach to the VR experience would result in mixed responses from clients which in turn could lead to more extensive probing in a face-to-face or telephone interview, the opportunity for follow-up from a written questionnaire, or, at the least, an opportunity for the client to air any dissatisfaction in an open-ended question. Consistent negative assessment in any one of these areas would be highly useful in guiding state evaluations and providing substantive input to programmatic improvements. The form and data sources for this element are shown below.

$$\frac{\text{\# closed clients satisfied with specific aspects of VR}}{\text{\# closed clients surveyed}} \times 100$$

Data Source	Data Item Identification
Closure or Follow-up Survey	Closed clients = same as 8(i); Specific aspects = client's present situation, information on disability and opportunities, counselor promptness, physical restoration services, job training services, placement services
Closure or Follow-up Survey	All closed clients

DATA ELEMENT 8 (iii): PERCENT 26 CLOSURES JUDGING SERVICES RECEIVED TO HAVE BEEN USEFUL IN OBTAINING THIS JOB/HOMEMAKER SITUATION

Consumers are not always qualified to judge the technical qualities of services received, the appropriateness of the training to the outcome, or whether the services should have netted a better job. The client can, however, make a fairly objective assessment of whether the services he/she received were instrumental in securing the outcome situation. The concern captured in this line of inquiry differs substantially from questioning whether a client was satisfied with the services; it looks at causality from the client's perspective, independent of an outside opinion as to the appropriateness of the service plan to the attainment of the closure situation.

Utility assessments necessitate surveying the clients, in this case the successful clients only. Although initially conceived as a follow-up survey, the information desired for this data element may actually improve if asked at closure. With two months in the employment situation, clients could be expected to assess accurately the relationship between their VR services and the situation attained. Again, uniform data collection methodology is of prime importance in ensuring the validity and comparability of this information. The form of data element 8 (iii) and the data sources are shown below.

$$\frac{\text{\# 26 closures judging services received to have been useful in obtaining their job/homemaker situation}}{\text{\# 26 closures surveyed}} \times 100$$

Data Source	Data Item Information
Closure or Follow-up Survey	Select for 26
Closure Survey Fact Sheet or Follow-up Survey Fact Sheet	Select for 26, using identifying data on survey instrument

DATA ELEMENT 8 (iv): PERCENT 26 CLOSURES JUDGING SERVICES RECEIVED TO BE USEFUL IN CURRENT PERFORMANCE ON THE JOB/HOMEMAKER SITUATION

Equally as important as VR services' contribution to the *attainment* of the client's closure situation is their usefulness in *functioning* in that position. While not unequivocably objective, the client's assessment of whether he/she uses the skills and/or knowledge gained from VR services is the closest approximation of the case. The form and data sources for this element are as follows:

$$\frac{\text{\# 26 closures judging services received to be useful in current performance on the job/homemaking situation}}{\text{\# 26 closures surveyed}} \times 100$$

Data Source	Data Item Information
Closure or Follow-up Survey	Select for 26
Closure Survey Fact Sheet or Follow-up Survey Fact Sheet	Select for 26, using identifying data on survey instrument

REVIEWERS' COMMENTS AND SUGGESTIONS

The following issues were raised regarding Standard 8 and its four data elements.

- This is an important thing for VR to do. It can help us out in times of budget battles.
- Clients respond in generalities about counselor, not in specifics. This may lead to misinterpretation.
- All of the data elements of Standard 8 raised questions about the validity of self-reported data and the high rate of non-response.
- Client satisfaction questions are in need of refinement. Some agencies requested this standard not be emphasized because of the reliability problem.
- Data source should be the closure survey rather than the follow-up survey.
- The value of information for program planning and management purposes is greatly exceeded by the cost of obtaining the information.

- Drop all data elements in Standard 8, and transfer the Standard to Procedural Standards. The new Standard should require each VR agency to develop a federally approved mechanism for soliciting input on client satisfaction. This consumer input should be evaluated and, where appropriate, used to effect program changes.

The claim that clients respond in generalities about the counselor appears to be borne out by the facts. Analysis of the pretest data show a high correlation (between 88% and 90% agreement) among dichotomized responses to the three counselor satisfaction questions. This finding suggests that these are but one question in the clients' minds and implies that there should be only one question on the survey.

The validity and reliability of the data were mentioned as possible problems with these data elements. Standard 8 is inherently subjective and, like most subjective assessments, will not have the highest reliability and validity. However, as one agency pointed out during a site visit, the real issue is not subjectivity, but whether the questions are understood by the respondents. This problem is more properly addressed by revision of the instrument. At this point, we should note that in the current political atmosphere, inclusion of Standard 8 is particularly vital, and as a practical matter, we may have to settle for less than ideal reliability and validity.

A question was also raised about the response rate of clients. In fact, the response rate to the closure survey was fairly good (about 60%), and the questions pertaining to Standard 8 had rather low levels of missing data (6% to 13% missing). The follow-up survey had a lower response rate (about 50%) and a few percent more missing data. It seems clear that we should rely on the closure survey for this standard. It already has an adequate response rate, and this can be improved by revision of the instrument.

It may be true, as suggested above, that the cost of obtaining information on satisfaction and usefulness exceeds the information's value for management. However, we should keep in mind that this standard serves primarily a political function; it's management uses are secondary. From this viewpoint the costs are probably not excessive.

Finally, it would be inappropriate to transfer this standard to the procedural standards. Client satisfaction and the usefulness of services pertains to an agency's performance and, if at all possible, should be reported on an ongoing basis. A procedural standard in this area would be appropriate only if it were impractical to monitor satisfaction/usefulness continuously. For all their faults, the data elements of Standard 8 provide this capability.

SUMMARY

There were two major problems raised in the preceeding discussion.

Reliability/validity of the data. This problem is especially acute for several items in data element (ii). The three counselor satisfaction items appear to be measuring the same thing, since clients are unable or unwilling to draw distinctions among them. These three items should be combined into a single measurement, and the three corresponding survey questions should also be combined. In addition, the "satisfied with present situation" item has rather poor face validity. VR is only one of many factors contributing to the client's present situation. Those other factors are not something over which VR has control or for which VR should be held accountable. This item should be deleted from data element (ii).

Non-response rates. While the response rates for both surveys were adequate, the closure survey had both a higher response rate and a lower missing data rate than the follow-up survey. The closure survey is clearly the preferred instrument for measuring the elements of Standard 8.

ANALYSIS OF PRETEST DATA FOR STANDARD 8

Table 15 presents the results of the analysis of the pretest data

Table 15

Statistics for Standard 8

(All from Closure Survey)

Data Element	Equation	State					
		VA	PA	MI	DE	OR	MS BLIND
8i	$\frac{\text{\# closed cases satisfied with overall VR experience}}{\text{\# closed clients surveyed}}$	85.5%	83.9%	73%	85.2%	76.7%	100%
8ii	$\frac{\text{\# closed clients satisfied with specific aspects of VR}}{\text{\# closed clients surveyed}}$	--	--	--	--	--	--
	Client's present situation	74.6%	67.2%	53.9%	63.4%	65.0%	84.6%
	Information on disability and opportunities	86.2%	84.1%	75.0%	80%	70.4%	96.8%
	Counselor's willingness to listen	89.9%	90.4%	82.0%	83.1%	82.3%	100%
	Counselor's promptness	91.4%	86.7%	82.5%	80.5%	83.6%	98.6%
	Physical Restoration Services	95.2%	100%	89.7%	86.8%	88.1%	98.1%
	Job Training Services	91.1%	100%	69.8%	81.6%	77.7%	85.7%
	Placement Services	84.2%	73.2%	74.3%	85.2%	76.1%	88.2%
8iii	# 26 closures judging services received to have been useful in obtaining their job/homemaker situation	86.8%	80.3%	80.0%	92.9%	80.1%	100%
8iv	# 26 closures judging services received to be useful in current performance on the job/homemaker situation	83.9%	83.2%	76.9%	90%	82.5%	100%

for Standard 8. Data for this part of the analysis were obtained from the closure survey.

Values for data element 8(i) range from 73% to 100%. The data element represents the percentage of closed clients surveyed who were satisfied with their overall VR experience.

Data element 8(ii) examines the satisfaction of closed clients with specific aspects of VR services. Satisfaction with the client's present situation varied across states from 54% to 85%. The three measures relating to the counselor display an interesting pattern. While there is considerable variation across states for each measure, there is very little variation across measures within a state. In only one state does the variation (i.e., percentage difference) among measures exceed 7.5%. And, as was mentioned earlier, there was close to 90% agreement among the measures, aggregated across states. Taken together, these results suggest that the three counselor satisfaction measures are tapping a single underlying factor.

The three measurements of client satisfaction with VR services show considerably more variation than the counselor measures, both across states (e.g. a 40% spread for job training services) and across measures (ranging from 5% to 27% difference depending on the state). While these measures are correlated, they do not display the unidimensional pattern of the counselor satisfaction measures.

Data element 8(iii) represents the percentage of 26 closures judging the VR services they received to have been useful in obtaining a job or homemaker situation. Values range from a low of 80% to a high of 100%. Data element (iv) is the percentage of clients rating VR services as useful in performance in the clients' situation. This measure has a similar range of values (from 77% to 100%). While these two data elements have a wide variation across states, there is very little difference between measures within a state. This no doubt reflects their conceptual similarity. Furthermore, when data from several states are combined, client ratings on the two measures are in agreement 93% of the time. It appears that these two data elements, like the counselor satisfaction items, are measuring essentially the same thing. This close correspondence argues for combining the two into a single data element.

Recommendations

- There was general agreement among the state agencies that Standard 8 reflects an important and legitimate concern for VR. We recommend that this Standard be retained in its present form.
- Data element (i): Client satisfaction with the overall VR experience is a good composite measure. It should be retained.
- Data element (ii) covers three areas:
  - Client satisfaction with his/her present situation involves many factors which may have little or nothing to do with VR. Because of its low conceptual validity, we believe this item should be deleted from data element (ii).
  - The results of the data analysis suggest strongly that the three counselor satisfaction items are in fact measuring the same thing. We recommend that these three items (and the corresponding questions on the survey) be combined into a single measure.
  - The three items measuring satisfaction with services are the most useful for internal management of an agency. They are distinct in concept, and the data suggest they are distinct in clients' minds. They should be retained as three separate items under data element (ii).
- Data elements (iii) and (iv) were so highly correlated that we can confidently conclude that they are measuring a single factor. They (and their corresponding questions on the survey) should be combined into a single data element.

V. DATA COLLECTION FORMS FOR THE PERFORMANCE STANDARDS

OVERVIEW

Four new forms were required to supplement data already collected on a routine basis, in order to meet the data requirements of the eight proposed Performance Standards. These forms were:

- R-300 Supplement A&B, designed to collect additional client information during eligibility determination and IWRP development.
- R-300 Supplement C&D designed to collect additional client information at closure.
- Closure Surveys designed to be distributed at closure as a mailback questionnaire, to collect client satisfaction and service utility assessments, and to collect information on functional and economic gains.
- Follow-up Surveys designed as a one-year post-closure mailout questionnaire for purposes of documenting retention of benefits (economic and functional), client satisfaction, and service utility assessments.

Training

A group training session, held in Houston, Texas on December 11 and 12, 1979, was the formal training provided on the performance standards' pretest activities. A comprehensive training manual was distributed to each of the MEU representatives in attendance and reviewed section by section at that time. For each pretest activity, the manual provided the following information:

- Background and rationale
- Sampling

- Scheduling
- Data collection methodology
- Data processing and reporting
- Data collection instrument

Following the training session, on-going telephone liaison was provided to the MEU's for clarification and problem solving throughout the pretest implementation. Two states requested additional technical assistance site visits at the conclusion of the data collection effort to assist in summarizing the states' experiences (Virginia) and to provide decision rules for data completion (Delaware).

Both sampling and scheduling for each activity were flexible to some degree, and compromises were negotiated with the MEU's to accommodate operational realities within individual states. The following table reflects the sample size and schedule goals presented in Houston for each performance standard pretest form (see Table 16).

Evaluation of the Pretest

Three evaluation activities of the performance standards' content, training and implementation experiences were conducted during the pretest:

- Prior to the formal training in Houston, the MEU's received copies of BPA's working papers and Final Reports, as well as an individual site visit during which the proposed standards system was presented and questions answered. At the initial meeting in Washington, D.C., in October, 1979, the first of several evaluation activities was initiated through the distribution of Pretest Assessment Form #1. The purpose of this activity was to document the MEU's initial reactions to the Performance Standards, their data elements and the sources for generating them prior to the pretest.

- The Houston training session was also evaluated by the participating representatives of the MEU's on Participant Evaluation and Comment Form #1.

Table 16

Sample Size Goals for Performance Standards Pretest Forms

Pretest Activity	Sample Size	Implementation Schedule	Submittal Schedule
R-300 Supplement A&B	100	1/1/80-1/31/80	4/30/80
(Status 06 and 10)			
R-300 Supplement C&D	500	1/1/80-3/31/80	4/30/80
(Status 26)	300		
(Status 08 from 02 & 06)	100		
(Status 28 and 30)	100		
Closure Surveys	400	1/31/80-3/31/80	5/15/80
(Status 26 from C&D above)[a]	300		
(Status 28 and 30 from C&D[a] above)	100		
Follow-Up Surveys			
(1-year follow-up on 26's[a] closed 1/1/79-3/31/79)	100	1/31/80-3/31/80	5/15/80
(6-month follow-up on 26's[a] closed 1/1/80-3/31/79 from C&D above)	300	7/31/80-9/30/80	11/15/80

[a] The original plan called for distribution of the surveys (mailing, as a rule) on the last day of each of three months during the period (i.e., January, February, and March, or July, August, and September.) Actual mailing dates varied across states.

- Following implementation of the pretest, the MEU's completed Pretest Assessment Form #3 on the Performance Standards to record obstacles to data collection, difficulties with the instruments and specific items on them, and procedural difficulties in implementing the Standards' instruments. The detailed reactions and comments obtained during these activities are presented in our Preliminary Pretest Report (November 24, 1980, available from RSA).

Time Requirements

The following table presents an overview of the states' levels of effort required to conduct the performance standards' pretest (see Table 17). The average investment of the Program Evaluation and support staff was 132 person days, or slightly over one-half person year to train staff, execute data collection, analyze these data, and manage the overall effort. The R-300 Supplements, Closure Surveys and Follow-up Surveys would appear to require approximately equal effort to accomplish, although the following factors would alter this:

- The counselors' time required to complete R-300 Supplements A&B and C&D is not included;
- The clients' time required to complete the Closure and Follow-up Surveys is not included:
- Execution and analysis of the six-month Follow-up Surveys are not included in these estimates.

Analysis and Recommendations

In the subsections which follow, we discuss the new data collection forms in greater detail. For each form, we present the findings on the MEUs' experience with the form during the pretest, on their reactions to the form, on the sample dimensions achieved, and on the time required (by counselors or clients) to complete the form. We end each section with our recommendations for the information items which will be required to implement the standards.

Table 17

Performance Standards Level of Effort

Person Days 10/79-8/80

(Numbers add down)

	DE	MI	MS	OR	PA	VA	AVG
General Administration	21.9	30.3	20.3	12.4	64.0	28.8	29.6
R-300 Supplements[a]	21.9[b]	19.2	12.0	10.2[c]	36.5	26.6	21.1
Training	5.5	8.4	4.4	1.1	12.1	7.8	6.6
Execution	15.9	3.4	0.0	5.5	21.6	13.8	10.0
Analysis	.5	7.4	7.6	3.6	2.8	5.0	4.5
Closure Surveys	25.4	23.3	17.6	17.3	24.5	5.6	19.0
Training	8.0	1.3	4.4	1.5	12.0	1.4	4.8
Execution	16.9	14.5	5.8	9.3	10.6	1.8	9.8
Analysis	.5	7.5	7.4	6.5	1.9	2.4	4.4
Follow-Up Surveys[d]	27.9	20.3	15.7	11.3	34.1	7.0	19.4
Training	8.0	1.0	4.4	1.8	5.8	1.9	3.8
Execution	19.9	15.5	4.3	4.6	22.0	3.3	11.6
Analysis	0.0	3.8	7.0	4.9	6.3	1.8	4.0
TOTAL	97.1	93.1	65.6	50.9	159.1	68.0	89.0
Adjusted total for[e] estimated clerical support	157.6	124.1	65.6	50.9	198.1	198.0	132.4

---

[a] Includes A+B and C+D. Labor estimates for R-300 Supplements do not include the field efforts to collect the information on the sample of clients. These are generated from the A+B and C+D forms themselves, on which counselors indicated the time required to complete the form on each client.

Table 17 (continued)

[b] The Program Evaluation Unit in Delaware elected to collect all of the R-300 Supplemental information, rather than train field staff. All other MEU's trained counselors in district offices to collect the information (see footnote c.)

[c] The Oregon agency revised its computerized case statistical reporting system prior to the pretest and incorporated all of the supplemental R-300 items at that time. Training of field staff was done shortly thereafter. Labor estimates could not be made because the activity was integrated in a much larger effort.

[d] These estimates represent primarily the 12-month follow-up activity, since the monthly time report information represented here covers only the year from October 1979 through August 1980, and most of the six-month follow-up effort was conducted following that.

[e] The Monthly Time Reports were only requested for professional staff committing at least 25% time to Task IV activities. Oregon and Mississippi, however, provided time sheets on their support staff. Based on internal time reporting, Delaware could document clerical investment of 1/4 time over the 11 months. Michigan estimated that an additional 1/3 of the professional time spent on Task IV was spent by clerical staff. Pennsylvania provided very specific estimates of the clerical investment, differing from month to month depending upon the nature of the Task IV activities and amounting to 39 person days. Virginia estimated support staff involvement based on internal time reporting at slightly greater than a half-time commitment.

R-300 SUPPLEMENTS

Supplemental R-300 Form A&B was designed to collect additional client information during eligibility determination and IWRP development. Form C&D is used at case closure for a similar purpose. Given their similarity in purpose and in the training required, we combine the discussions of the two forms whenever appropriate.

While the specific information items being proposed as necessary additions to the federal RSA-300 form was mildly disputed on substantive grounds, the major concern was an operational one. Without pretesting the validity, reliability and utility of the proposed additions prior to requiring massive revisions to state R-300 data systems (forms, methodologies, data processing and reporting), the states might well incur major costs, delays and staff dislocations which could then be deemed unnecessary, pending the analytic results of the pretest data. This concern was forestalled by the development of the R-300 Supplemental A&B and C&D forms, designed to collect the proposed additional information on a time-limited sample of appropriate cases only.

Example copies of the R-300 supplement forms appear in Exhibit 1 (A&B) and in Exhibit 2 (C&D). It is important to remember that the supplemental forms were developed solely for the purposes of pretesting the data items being proposed as additions to the federal RSA-300 form and are not to be viewed as additional instruments for national implementation. The identifying information at the top of the forms was to enable linkage of the supplemental information on each client with the states' R-300 data tape.

The purposes of the individual data items on the supplements were as follows:

FORM A

Item U	To calculate Standards 4(iii) and 6(i).
Item V	For use in comparability adjustments.
Item W	For use in locating clients during service provision and to improve follow-up survey response rates.
Item X	To calculate pretest level of field effort.

EXHIBIT 1

SUPPLEMENTAL R-300 FORM A & B

(To be used exclusively for the pretest of the revised VR Standards.)

Card Number: /_1_/ 1

Agency Code: /__/__/ 2-3

District Code: /__/__/__/ 4-6

Case Number: /__/__/__/__/__/__/__/__/__/__/ 7-16

Social Security Number: /__/__/__/-/__/__/-/__/__/__/__/ 17-25

Client Name: ____________________

FORM A (SUPPLEMENT TO R-300 Part 2)

(TO BE RECORDED AT COMPLETION OF REFERRAL PROCESS)

> If closed from Status 02, complete Form D, Supplement to R-300 Part 3. If accepted for Extended Evaluation or VR Services, complete Form A, Supplement to R-300 Part 2.

U. Earnings Year Prior to Referral: $ /__/__/,/__/__/__/ 26-30

V. Federal Special Program Identification:

None	TF	VET		MAW	PO	WIN	SEC4	SF	SD
000	001	002	004	010	020	040	100	200	400

Sum: /__/__/__/ 31-33

W. Permanent Address of Friend or Relative Living in State:

(if available, enter 1
if not, enter 0) /__/ 34

____
Last Name First Name Initial

____
Address: Street and Number

____
City State Zip Code

____
Area Code Telephone Number

Relationship to Client: ____________________

X. COUNSELOR: Time in Minutes Required to Complete Form A: /__/__/__/ 35-37

FORM B (SUPPLEMENT BETWEEN R-300 Parts 2 and 3)

(TO BE RECORDED AT COMPLETION OF IWRP)

> Complete on all clients accepted for VR Services

A. Date IWRP Completed: /__/__/-/__/__/-/__/__/ 38-43
month day year

B. Work Status of Original IWRP Goal: /__/ 44

C. Original Occupational Goal (Title): ____________________

DOT Code: /__/__/__/__/ 45-48

D. COUNSELOR: Time in Minutes Required to Complete Form B: /__/__/__/ 49-51

____
Counselor Signature

EXHIBIT 1 (cont'd.)

DEFINITIONS TO BE USED IN COMPLETING SUPPLEMENTAL R-300 FORM A & B

Identifying Information

Agency Code: Two-digit code from RS Manual indicating pretest state agency, as follows:

06 Delaware
21 Michigan
73 Mississippi Blind
36 Oregon
37 Pennsylvania
46 Virginia

District Code: Three-digit code using whatever district number is currently assigned in the state agency. Right justify.

Case Number: Up to ten-digit code which should correspond to the client identification number used in the state agency for R-300 coding purposes. Right justify.

Social Security No.: Nine-digit Social Security Number. For the purposes of the pretest only, to facilitate linkage with other data sources.

Client Name: For the purposes of the pretest only, to facilitate linkage with other data sources.

FORM A (Supplement to R-300 Part 2)

U. Earnings Year Prior to Referral:

Enter the amount (to the nearest dollar) the individual earned in the year prior to the date he or she was referred. If this client had no earnings, enter "0". This item is an estimate provided by the individual of his or her cash earnings. Use the same definitions currently used in the R-300 Part 2 Item P for weekly earnings. Right justify.

V. Federal Special Program Identification:

Use the same categories and definitions of them as currently used in R-300 Part 3 Item D.

W. Permanent Address of Friend or Relative Living in State:

Provide the name, street address, city, state, zip code, telephone number, and relationship of person to client for the purposes of facilitating closure and follow-up contacting

X. Counselor: Time Required to Complete Form A

The counselor completing the form should estimate his or her level of effort in minutes for collecting and filling out the information requested. Right justify.

FORM B (Supplement Between R-300 Parts 2 and 3)

A. Date IWRP Completed:

The date the client's original IWRP, after acceptance for VR services (Status 10), was completed.

B. Work Status of Original IWRP Goal:

The same one-digit categories and their definitions as currently used in R-300 Part 3 Item I, but describing what the client will be doing if the plan is successfully completed:

1 Competitive Labor Market
2 Sheltered Workshop
3 Self-employed (except BEP)
4 State-agency-managed BEP
5 Homemaker
6 Unpaid Family Worker

C. Original Occupational Goal (Title):

For purposes of checking the classification of the work status in B.B. above, provide the actual job goal listed in the original IWRP.

DOT Code: Record four-digit code from the Dictionary of Occupational Titles for the vocational goal stated in B.C. above.

D. Counselor: Time Required to Complete Form B:

(Same as Form A.X. above) The counselor completing the form should estimate his or her level of effort in minutes for collecting and filling out the information requested. Right justify.

EXHIBIT 2

SUPPLEMENTAL R-300 FORM C & D

(To be used exclusively for the pretest of the revised VR Standards.)

Card Number: / 2 / 1

Agency Code: / / / 2-3

District Code: / / / / 4-6

Case Number: / / / / / / / / / / / 7-16

Social Security Number: / / / /-/ / /-/ / / / / 17-25

Client Name: ________________________

FORM C (SUPPLEMENT BETWEEN R-300 Parts 2 & 3)

(TO BE TAKEN FROM COMPLETED IWRP)

Complete only on closed clients accepted for VR services.

A. Date IWRP Completed: / / / / / / / / / 26-31
month day year

B. Work Status of Original IWRP Goal: / / 32

C. Original Occupational Goal (Title) ________________________

DOT Code: / / / / / 33-36

D. COUNSELOR: Time in Minutes Required to Complete Form C: / / / / 37-39

FORM D (SUPPLEMENT TO R-300 Part 3)

(TO BE RECORDED AT TIME OF CLOSURE)

Complete on closed clients reaching at least Status 02, including 08, 26, 28, and 30.

Closure Status:

if closed 08 from 02, enter 2 / / 40
if closed 08 from 06, enter 3
if closed 26 enter 4
if closed 28 enter 5
if closed 30 enter 6

Q. Primary Source of Support: / / / 41-42

R. Number of Hours Working Per Week: / / / 43-44

S. COUNSELOR: Time in Minutes Required to Complete Form D: / / / / 45-47

____
Counselor Signature

EXHIBIT 2 (cont'd.)

DEFINITIONS TO BE USED IN COMPLETING SUPPLEMENTAL R-300 FORM C & D

Identifying Information

Agency Code: Two-digit code from RS Manual indicating pretest state agency, as follows:

06	Delaware	36	Oregon
21	Michigan	37	Pennsylvania
73	Mississippi Blind	46	Virginia

District Code: Three-digit code using whatever district number is currently assigned in the state agency. Right justify.

Case Number: Up to ten-digit code which should correspond to the client identification number used in the state agency for R-300 coding purposes. Right justify.

Social Security No.: Nine-digit Social Security Number. For the purposes of the pretest only, to facilitate linkage with other data sources.

Client Name: For the purposes of the pretest only, to facilitate linkage with other data sources.

FORM C (Supplement Between R-300 Parts 2 and 3)

A. Date IWRP Completed:

(Same as Form B.A.) The date the client's original IWRP, after acceptance for VR services (Status 10), was completed.

B. Work Status of Original IWRP Goal:

(Same as Form B.B.) The same one-digit categories and their definitions as currently used in R-300 Part 3 Item I, but describing what the client was to be doing if the plan were successfully completed:

1	Competitive Labor Market	4	State-agency-managed BEP
2	Sheltered Workshop	5	Homemaker
3	Self-employed (except BEP)	6	Unpaid Family Worker

C. Original Occupational Goal (Title):

(Same as Form B.C.) For purposes of checking the classification of the work status in B.B. above, provide the actual job goal listed in the original IWRP.

DOT Code: (Same as Form B.C.) Record four-digit code from the Dictionary of Occupational Titles for the vocational goal stated in C.C. above.

D. Counselor: Time Required to Complete Form C:

(Same as Form A.X.) The counselor completing the form should estimate his or her level of effort in minutes for collecting and filling out the information requested. Right justify.

FORM D (Supplement to R-300 Part 3)

Enter the code given for closure status.

Q. Primary Source of Support:

The same two-digit categories and their definitions as currently used in R-300 Part 2 Item S, only capturing the primary source of support at closure:

00	Current earnings, interest, dividends, rent	05	Public institution, tax supported
01	Family and friends	06	Workmen's compensation
02	Private relief agency	07	Social Security Disability Insurance benefits
03	Public assistance, at least partly with federal funds	08	All other public sources
04	Public assistance, without federal funds (GA only)	09	Annuity or other non-disability insurance benefits (private)
		10	All other sources of support

R. Number of Hours Working Per Week:

Enter the number of hours the individual is working per week. If the client is a homemaker or is not working, enter "0". This item is an estimate provided by the client. Right justify.

S. Counselor: Time Required to Complete Form D:

(Same as Form A.X.) The counselor completing the form should estimate his or her level of effort in minutes for collecting and filling out the information requested. Right justify.

FORM B and C (contained identical data items)

Item A	Pretest validity checkpoint.
Item B	To calculate Standard 5(iii).
Item C	Pretest validity checkpoint.
Item D	To calculate pretest level of field effort.

FORM D

Item Q	To calculate Standard 5(ii).
Item R	To calculate Standards 4(iv) and 7(ii).
Item S	To calculate pretest level of field effort.

DATA COLLECTION METHODOLOGY

The data collection methodology stipulated that state staff would train counselors in all or a sample of state districts to collect the supplemental information. For the A&B form, the data collection plan called for counselors to collect the A&B data on all or a sample of clients at acceptance (for VR services or extended evaluation) and at completion of the IWRP (for those clients accepted for VR services). Since the proposed sample size was only 100 clients in Statuses 06 and 10 during the month of January, 1980 and the states' estimated volumes of such clients ranged from less than 100 to nearly 5000 during that time period, the states employed various approaches to securing a representative sample. Table 18 illustrates the sample size achieved in each MEU, the proportion of state districts and the number of field staff involved in the data collection effort.

For the C&D form, the data collection methodology stipulated that the state staff would train counselors in all or a sample of state districts to collect the supplemental data on all or a sample of clients closed during the first quarter of 1980. Since the MEU volumes of such clients ranged from well below to well above the sample goals of 300 26-closures, 100 28-and 30-closures, and 100 08-closures from Status 02 and 06, the states employed various approaches to securing a representative sample. Table 19 illustrates the sample size achieved in each MEU, the proportion of state districts and the number of field staff involved in the data collection effort.

Table 18

R-300 Supplement A+B: Sampling Dimensions

	DE	MI	MS	OR	PA	VA
Final Sample (Goal: 100 Status 06's and Status 10's)	111[a]	161	47[a]	100	100	161
Number of Districts in State Involved/Total	3/3	4/42	17/21	32/32	1/15	20/61
Number of Field Staff Involved in Data Collection	37[b]	41	46	275[c]	29	90

[a] All clients accepted into Status 06 and 10 during the sample month.

[b] Minimal involvement of field staff since PE Unit completed forms.

[c] All counselors throughout the state routinely collect this information.

Sample Representativeness:

DELAWARE	Sample representative regarding ratio of 06 to 10 cases appears satisfactory in that it was estimated that Status 10 cases should represent at least 75% of total.
MICHIGAN	Despite the size of the sample and somewhat arbitrary selection criteria, we believe that the clients selected for participation in the pretest of A+B are generally representative of MBR clients.
MISSISSIPPI	Northern portion contains twice as many as central and South, which are more populous. Sample consisted of all clients accepted into 06 and 10, but it was only half the requested sample size. Only a smaller number could be more evenly distributed.
OREGON	Not applicable. We sampled to get 100 rather than use 1/80 cases.
PENNSYLVANIA	Yes.
VIRGINIA	Representative of volume of clients during the same period of time in 1979 Regions I and II.

Table 19

R-300 Supplement C+D: Sampling Dimensions

	DE[a]	MI	MS[a]	OR	PA	VA
Final Sample (Goal: 300 Status 26's	142	333	86	300	300	301
100 Status 28's and 30's	57	189	26	100	101	118
100 Status 08's from 02 & 06)	112	179	303	100	102	156
Number of Districts Involved/Total	3/3	8/42	20/21	32/32	3/15	19/61
Number of Field Staff Involved	37[b]	83	46	275[c]	9	90

[a] All clients closed in Status 26, 28, 30 and 08 from 02 and 06.

[b] Minimal involvement of field staff since PE Unit completed forms.

[c] All counselors throughout the state routinely collect this information.

Sample Representativeness:

DELAWARE	Sample representation for cases closed 28 and 30 seems fair. However, about 66% of the total FY rehabilitants are closed during the second half of the FY.
MICHIGAN	The district offices selected for participation in the Supplemental C+D pretest comprise a stratified random sample of all MBR district offices and the clients about whom information was collected are believed to represent a good cross-section of all 1st qtr. MBR clients.
MISSISSIPPI	All districts in state represented.
OREGON	Not applicable. Inappropriate for sample size requested.
PENNSYLVANIA	Yes.
VIRGINIA	Representative of volume of clients during the same period of time in 1979 Regions I and II.

Summary of Pretest Experience

We have detailed the comments and reactions received from MEU and other state and RSA reviewers, in our Preliminary Pretest Report. Those comments pertain to the training and data collection methodologies, to the instrument formats, and to the individual data items. In this section, we summarize those comments and reactions.

Despite the variety of caseloads and the different methods used to derive a sample population, the MEU's generally felt that the clients selected for participation in the pretest were representative of their agencies' caseload. The only concern expressed was that more clients are closed during the second half of the fiscal year, a fact not reflected in the C&D population given the sampling time frame.

Each state district participating in the pretest sent counselors and administrators to a training session to learn how to use the R-300 supplementary materials. Only one state had to augment the existing instructions for extra clarity. This state also recommended a follow-up session for feedback.

Data collection was carried out primarily by counselors reviewing their case files and contacting clients as necessary to supply missing information. In some cases the Planning and Evaluation Division stepped in to relieve the burden on counselors. One state did not have to supplement current data collection techniques due to a recent revision in its computerized reporting system, which incorporated all supplemental information into the regular reporting system.

None of the states mentioned any major problems with the format of the data collection instrument. The typical response was "adequate." Some concern was expressed regarding the additional paperwork involved.

Opinions about the procedures to train counselors and administrators in using the R-300 supplements were mostly positive. One state suggested that the procedures were not clear and needed simplification. Another raised the issue of confidentiality of information, as it relates to client privacy.

To improve data collection methodology, one state recommended simplifying procedures and taking the responsibility of data collection out of the hands of the counselors. Another state recommended changing the format of the R-300 supplement to facilitate clerical processing.

General Data Findings From the Pretest

In addition to time investments required by states to implement the pretest, other concerns include the amount of missing data found on the forms, and the time required by counselors to fill out the forms. The reasons for these concerns should be obvious: as regards missing data, it is of little use to require additional data collection if, despite counselor's efforts, the information is so difficult to collect that large amounts of missing data result. As regards counselor time requirements, it again is of little use to require additional data collection if the level of effort is so great as to overshadow the value of the additional information. Below we present our findings with regard to the levels of missing data on the A&D and C&D forms, and on the time required of counselors to complete the forms.

Missing Data Levels

Form A -- The items on Form A had relatively few missing data problems. One state was missing a third of its data on earnings in the year prior to referral. Aside from this, however, there was little or no data missing on any other item on the form.

Form B -- The comments of the MEU's suggested that there were problems in determining the date of IWRP completion. The wide range in missing data rates (from 2% to 62%) indicates the large variation among the states in their ability to collect this datum. The variation was similar for the other items on this form. The work status of the original IWRP goal, the original occupational goal, and the time required to complete the form were all missing between 2% and 64% of the time.

As noted, one major problem (both for those collecting the data and for those attempting to analyze it) concerns the time-frame for data collection vis-a-vis the speed with which clients proceed through the various statuses. For example, given the short time-frame, it was quite likely that a certain proportion of clients would not have reached status 12 by the end of the data collection period. Such clients obviously could not have the part B information recorded at the point of the state's submittal of its data. Alternatively, some clients may be closed 08 from 06, or may be closed 30 from status 10, again precluding completion of part B. Unfortunately, the form failed to provide for such situations. As a result, when looking at the amount of missing data on form B, our interpretation of the findings could be biased toward a judgment of "failure to locate" the data. In fact, the true situation (for many clients) may be one of "inappropriateness"; that is, the data is justifiably missing. This problem could have been avoided by including a space on the form (to be keypunched) indicating if a client had or had not reached status 12.

Form C -- The information on Form C is identical to that of Form B. The only difference between them is that the forms are used at different points in the case process. This apparently had little impact on the agencies' ability to collect the data. While the variation among states was smaller for Form C (e.g., 0.2% to 34% for IWRP date), the overall levels of missing data were about the same.

Despite these findings, it is possible that missing data levels could go down, if part B (C) is integrated into the R-300. In the pretest, most of the clients on whom a C&D form was filled out probably reached status 12 long before the beginning of the pretest. Thus, part C required the counselor to "think back" to when the IWRP was completed, and what the plan said. (We'll ignore the fact that the IWRP is supposed to be in the case record, dated, and complete.) The same problem exists for form B, and is compounded by the "inappropriateness" issue. However, if the information was included as a separate section of the R-300, to be filled out at completion of the IWRP (as was the original BPA design), the problem of missing data might be greatly reduced. Presuming, of course, that the R-300 is updated upon reaching status 12.

Form D -- There are four items on Form D. The client's closure status was almost always filled in. Similarly, the time requirement data were missing only occasionally (between 0% and 6% of the time). However, problems did arise with the other two items. Between 1% and 21% of the data on clients' primary source of support was missing. Finally, the number of hours worked per week was missing between 0% and 43% of the time.

Counselor Time Requirements

Here we describe the amount of time required for counselors to complete R-300 supplement A+B and C+D. While the figures cited below are informative in themselves, it should be noted that completion of the forms may take less time once they are incorporated into the R-300 form. Table 20 presents the average time and median time to complete the various forms, and shows the number of cases on which data were available. Oregon has already incorporated the supplemental information into its data collection procedures; as such, it was inappropriate (and essentially impossible) for the state to determine the time required to collect the extra data.

Form A. As shown in Table 20, the average time required to collect Form A supplemental data ranged from 3.7 to 6.5 minutes per client. The maximum amount of time required for any case was 20 minutes; the minimum, one minute. As indicated by the median values, for each state it was possible to collect the data for at least half of the state's clients within about five minutes.

Form B. In the aggregate, Form B took considerably less time to complete than did Form A, with average times ranging from 1.9 to 3.9 minutes.

Form C. The data in Table 20 show that, on average, less than four minutes was needed to complete Form C. In data like this, the arithmetic means tend to be inflated by the few cases which require a large amount of time (as much as 18 minutes on Form C). In fact, the majority of forms were completed in less than three minutes, and 88% required five minutes or less. Note that, often, Form C required more time on average than did the identical Form B. This may result from counselors having to "look back" in time for Form C clients (who were closed from VR during our sample period), whereas the Form B data may have more often been completed at the same time as completion of the IWRP, thus requiring no "looking back."

Form D. The data for Form D are very similar to that of Form C. A few cases took a lot of time (up to 20 minutes), while most required less than three minutes. Ninety percent of the forms were completed in five minutes or less.

Table 20

Counselor Time Required to Complete R-300 Supplement

(in minutes)

	FORM A			FORM B			FORM C			FORM D		
	AVG	MED	(N)	AVG	MED	(N)	AVG	MED	(N)	AVG	MED	(N)
Delaware	5.4	4.6	107	3.9	3.5	107	3.8	3.7	281	4.7	4.2	292
Michigan	3.7	3.1	159	1.9	1.6	96	2.5	1.7	514	2.0	1.3	687
Mississippi	6.5	5.1	47	2.8	2.1	45	2.7	1.5	204	2.4	1.4	419
Oregon[a]	-	-	-	-	-	-	-	-	-	-	-	-
Pennsylvania	4.5	3.3	100	2.9	2.5	98	3.8	3.0	414	3.4	3.1	503
Virginia	6.3	4.9	255	2.3	1.3	95	3.8	3.9	389	3.4	2.7	575

[a] Oregon had incorporated the supplemental information into its R-300 equivalent and thus could not provide data on time requirements.

Suggested Revisions to the R-300 Supplements

Below we discuss the data items which will need to be added in revising the R-300. The reader should recall that these items will become a part of the R-300, to be collected at the appropriate milestone (i.e., acceptance, completion of plan, and closure). They will not take the form of "supplements" to the R-300, which will require recontacting clients. The recommendations are as follows:

Form A (information collected at acceptance)

- Item U: Earnings Year Prior to Referral. This item was needed to compute data elements 4(iii) and 6(i). We have recommended that both of these data elements be removed from the standards. Further, for the new data element 6(i) -- average change in earnings -- which replaces data element 4(iii), we have recommended using R-300 data until implementation of an annual SSA data link. Thus, Item U will not be needed for the standards. Recommendation: Delete Item U.
- Item V: Federal Special Program Identification. This item would be used to compute a "percent severe" statistic. While not used specifically for a standards data element[1], this piece of information could be useful to program managers for monitoring their caseloads. (The utility of this item will be further enhanced if the MIS split R-300 recommendation is implemented. Under this recommendation, R-300 data would be input into the MIS at the point of plan completion. This would include the sections on referral information (sections 1 and 2 of the R-300) and on the plan (the new section 3 of the R-300).) Recommendation: Retain this item.
- Item W: Address of Friend or Relative. This item also is not used specifically to compute any data elements. However, it potentially could be very helpful in boosting response rates to

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[1] The new data element 1(ii) -- severely disabled as a percent of all clients served -- will be computed using data from the new RSA-113 form.

the Follow-Up Survey, as well as in keeping contact with clients in service statuses. However, it is not necessary or desirable for this information to be included on the R-300 input data sent to RSA. Instead, we strongly recommend that individual state agencies include this information on their R-300 equivalent only. Recommendation: Delete Item W from the R-300, and encourage states to obtain the information on their R-300 equivalent form.

- Item X: Counselor Time. This was needed only for the pretest. Recommendation: Delete this item.
- (New item, not pretested) Functional Assessment/Life Status Indicators (assessed at acceptance). The FAI/LSI items will soon undergo a pretest prior to their inclusion in the MIS. The items chosen for inclusion should be added to the R-300, for use in addressing data element 5(ii) and the new recommended data element 6(ii).

Form B, Form C (information collected at completion of plan)

Each of the items (except D, "Counselor Time") pertain to the original IWRP. Item B, "Work Status," was needed to calculate data element 5(iii). Although we recommend moving that data element to the Procedural Standards, the form of the data element remains the same. Thus the information is still needed. The other two items -- Item A, "Date IWRP Completed," and Item C, "Original Occupational Goal" -- are not used to calculate data elements. However, both of these items are potentially useful to program managers, and we feel they should be retained.

The date of IWRP completion is useful to have on the R-300 both to verify the Case Record and to calculate the months a client is in status 10. The occupational goal is useful to have as a cross-check on work status of goal and to inform managers of the range of occupational goals made by clients and counselors. These items must be filled out at the point of completing the original IWRP goal. Recommendation: Retain items A, B, and C. Delete item D.

Form D (information collected at closure)

- Item Q: Primary Source of Support at Closure. This item was needed to calculate data elements 4(iv) and 7(ii). We have recommended deleting data element 4(iv), but retaining 7(ii). Thus this item continues to be needed, though the methodology for determining primary source of support should be changed (as discussed under Standard 7). Recommendation: Retain this data item and change instructions for computation of primary source of support.
- Item R: Number of Hours Working Per Week. This item was needed to calculate data element 5(ii), which has been retained in a modified form. Recommendation: Retain Item R.
- Item S: Counselor Time. Needed only for the pretest. Recommendation: Delete.
- (New item, not pretested) Functional Assessment/Life Status Indicators (assessed at closure). Again, for addressing data elements 5(iv), 6(ii), and 7(iii), client scores at closure on the FAI/LSI items must be included on the R-300.

Summary

To recap, the data items which we recommend retaining in (actually, adding to) the R-300 are as follows:

- At acceptance:
  - -- Federal Special Program ID;
  - -- Address of friend or relative (in state R-300 only -- not to be computerized);
  - -- FAI/LSI items selected after pretesting.
- At plan completion:
  - -- Date original IWRP completed;
  - -- Work status of original IWRP goal;
  - -- Original occupational goal.
- At closure:
  - -- Primary source of support (determined via methodology described under Standard 7);

-- Number of hours working per week;

-- FAI/LSI items selected after pretesting.

CLOSURE SURVEY

The Closure Surveys were distributed at case closure as a mailback questionnaire to be completed by former clients. The surveys record client satisfaction and assess the utility of services received. They also document functional gains and the degree to which clients attribute these gains to VR services. In terms of functional uses for the pretest, the Closure Survey was designed to serve several purposes:

- to collect data from clients to respond to several Standards' data elements;
- to validate closure information recorded on the R-300, the Supplemental C&D Form, and within the Closure Survey itself;
- to compare response rates and answers at closure with those at follow-up.

The Closure Survey appears in the following pages as Exhibit 3. The reader can use the Exhibit to understand the purposes of the specific data items, as listed in Table 21.

Data Collection Methodology

The data collection methodology stipulated end-of-the-month initial mailouts to the sample of closed clients on which R-300 Supplement C&D had been collected (excluding the Status 08 closures). Table 22 illustrates the sample size, proportion of districts in each state involved in the effort, and the response rate achieved by each MEU. The response rates cover quite a range, from 46% to 80% return. Not surprisingly, those states experiencing higher rates are the ones who followed the proposed response rate assurance procedure in greater detail. The procedure recommended included the following steps:

- Sending reminder postcards to non-respondents two weeks after the initial distribution;
- Mailing a second questionnaire to the remaining non-respondents a week later;

2-5 Questionnaire No. |__|__|__|__|

VOCATIONAL REHABILITATION SURVEY

CLOSURE QUESTIONNAIRE

6-7 (1) **Which of the following statements best describes your present situation?** *(Please check only one box)*

☐ 1. I earn a wage or salary at a regular job.
☐ 2. I earn a wage or salary in a sheltered workshop (for example, a place like a workshop for the blind or Goodwill Industries).
☐ 3. I am self-employed.
☐ 4. I earn a wage or salary in a state-managed Business Enterprise Program (that is, a state-run program intended specifically for disabled people).
☐ 5. I am a homemaker (that is, a person whose primary work is taking care of the home).
☐ 6. I work on a family farm or in a family business without pay.
☐ 7. I am not working at present. I am: A student
☐ 8. I am not working at present. I am: Retired
☐ 9. I am not working at present. I am: A trainee
☐ 10. Other *(Please explain)* ______________________________
____
☐ 11. My situation is not listed above. *(Please explain)*
____
____

8 (2) **How satisfied are you with your present situation?** *(Please check one)*

☐ 1. Very satisfied
☐ 2. Somewhat satisfied
☐ 3. Somewhat dissatisfied
☐ 4. Very dissatisfied
☐ 5. No opinion

9-10 (3) **About how many hours a week do you work?** *(Please check one and fill in the boxes)*

☐ I usually work about |__|__| hours a week.
☐ I don't know.
☐ I am not working.

11-13 (4) **What are your present earnings?** *(Please check one and fill in the boxes)*

☐ I earn $ |__|__|__| per week.
☐ I don't know.
☐ I am working but I don't receive a wage or salary.
☐ I am not working.

14-15 (5) **What is your largest source of support?** *(Please check one)*

☐ 1. Current earnings from a job.
☐ 2. Earnings from interest, dividends, or rent payments.
☐ 3. Family and friends.
☐ 4. Private relief agency (for example, the Salvation Army, Goodwill Industries
☐ 5. Supplemental Security Income (SSI) for the Blind
☐ 6. Supplemental Security Income (SSI) for the Aged
☐ 7. Supplemental Security Income (SSI) for the Disabled
☐ 8. Aid to Families with Dependent Children (AFDC)
☐ 9. General Assistance (GA)
☐ 10. Other public welfare *(Please explain)* ____________________
____
☐ 11. Public institutions (for example, a tax-supported hospital, nursing home, treatment center, etc.)
☐ 12. Workmen's Compensation
☐ 13. Social Security Disability Insurance Benefits (SSDI)
☐ 14. Veteran's Benefits
☐ 15. Private Insurance
☐ 16. Other: *(Please explain)* ____________________
____

16-19 (6) **How much income, if any, did you (or your dependents) receive last month from all sources of public welfare?** *(Please check one and fill in the boxes)*

☐ I received $ |__|__|__|__| last month.
☐ None
☐ I don't remember.

20 (7) **Sometimes, after receiving rehabilitation services and training, disabled people are better able to care for themselves. This may allow other family members to work, or to work longer hours at a job they already have. Is this so in your case?** *(Please check one)*

☐ 1. Yes ☐ 2. No ☐ 9. I don't know.

21 (8) **Sometimes, as a result of contact with the rehabilitation program, disabled people find their personal attitudes change. How do you feel about yourself now, compared to before you were in the rehabilitation program?** *(Please check one)*

☐ 1. I feel the same about myself.
☐ 2. I feel better about myself.
☐ 3. I feel worse about myself.
☐ 9. I don't know.

22 (9) **How do you feel about your future, compared to before you were in the rehabilitation program?** *(Please check one)*

☐ 1. I feel the same about my future.
☐ 2. I feel better about my future.
☐ 3. I feel worse about my future.
☐ 9. I don't know.

EXHIBIT 3

(10) **Are there any functions of self-care you have improved in since coming to rehabilitation program?** *(Please go down the left side of the list and look at items you might have improved in. For each item in the list, check whether you have had any improvement and, if you feel you have had some improvement, check how much you feel your improvement is due to help, services or training you received through the rehabilitation program)*

			I had no improvement	I had an improvement mostly due to the program	I had an improvement somewhat due to the program	I had an improvement, not at all due to the program	I had an improvement not sure if due to the program	This was never a problem for me
23	a.	Feeding	1. ☐	2. ☐	3. ☐	4. ☐	5. ☐	6. ☐
24	b.	Bathroom functions	1. ☐	2. ☐	3. ☐	4. ☐	5. ☐	6. ☐
25	c.	Taking medicine	1. ☐	2. ☐	3. ☐	4. ☐	5. ☐	6. ☐
26	d.	Grooming (shaving, hair care, make up, etc.)	1. ☐	2. ☐	3. ☐	4. ☐	5. ☐	6. ☐
27	e.	Dressing and undressing	1. ☐	2. ☐	3. ☐	4. ☐	5. ☐	6. ☐
28	f.	Moving my body weight	1. ☐	2. ☐	3. ☐	4. ☐	5. ☐	6. ☐
29	g.	Moving around the home	1. ☐	2. ☐	3. ☐	4. ☐	5. ☐	6. ☐
30	h.	Climbing stairs	1. ☐	2. ☐	3. ☐	4. ☐	5. ☐	6. ☐
31	i.	Reading	1. ☐	2. ☐	3. ☐	4. ☐	5. ☐	6. ☐
32	j.	Writing	1. ☐	2. ☐	3. ☐	4. ☐	5. ☐	6. ☐
33	k.	Talking	1. ☐	2. ☐	3. ☐	4. ☐	5. ☐	6. ☐
34	l.	Answering the phone	1. ☐	2. ☐	3. ☐	4. ☐	5. ☐	6. ☐
35	m.	Moving on the street	1. ☐	2. ☐	3. ☐	4. ☐	5. ☐	6. ☐
36	n.	Using public transportation	1. ☐	2. ☐	3. ☐	4. ☐	5. ☐	6. ☐
37	o.	Driving a car	1. ☐	2. ☐	3. ☐	4. ☐	5. ☐	6. ☐
38	p.	Other *(Please explain)*	1. ☐	2. ☐	3. ☐	4. ☐	5. ☐	6. ☐

____

____

(11) If you are primarily a homemaker, are there any skills and activities related to homemaking you have improved in since coming to the rehabilitation program? *(Please go down the left side of the list and look at the items you might have improved in. For each item in the list, check whether you have had any improvement and, if you feel you have had some improvement, check how much you feel your improvement is due to help, services or training you received through the rehabilitation program)*

			I had no improvement	I had an improvement, mostly due to the program	I had an improvement somewhat due to the program	I had an improvement not at all due to the program	I had an improvement not sure if due to the program	This was never a problem for me
39	a.	Caring for children and family	1. ☐	2. ☐	3. ☐	4. ☐	5. ☐	6. ☐
40	b.	Caring for pets	1. ☐	2. ☐	3. ☐	4. ☐	5. ☐	6. ☐
41	c.	Cooking and fixing meals	1. ☐	2. ☐	3. ☐	4. ☐	5. ☐	6. ☐
42	d.	Washing dishes	1. ☐	2. ☐	3. ☐	4. ☐	5. ☐	6. ☐
43	e.	Cleaning house	1. ☐	2. ☐	3. ☐	4. ☐	5. ☐	6. ☐
44	f.	Doing laundry	1. ☐	2. ☐	3. ☐	4. ☐	5. ☐	6. ☐
45	g.	Shopping for food and groceries	1. ☐	2. ☐	3. ☐	4. ☐	5. ☐	6. ☐
46	h.	Running errands	1. ☐	2. ☐	3. ☐	4. ☐	5. ☐	6. ☐
47	i.	Budgeting and paying bills	1. ☐	2. ☐	3. ☐	4. ☐	5. ☐	6. ☐
48	j.	Taking part in neighborhood activities	1. ☐	2. ☐	3. ☐	4. ☐	5. ☐	6. ☐
49	k.	Other: *(Please explain)*	1. ☐	2. ☐	3. ☐	4. ☐	5. ☐	6. ☐

____

____

50 **(12) Have you improved in any job-related skills and activities (like typing, using tools and machinery, assembly work, serving people, and so on) since coming to the rehabilitation program?** *(Please check one)*

☐ 1. No

☐ 2. Yes *(If yes, please explain the types of improvements)*

____

____

____

EXHIBIT 3 (cont'd.)

51 **(13) How satisfied are you with the information provided by your counselor about your disability and the opportunities for improving your situation?** *(Please check one)*
☐ 1. Very satisfied
☐ 2. Somewhat satisfied
☐ 3. Somewhat dissatisfied
☐ 4. Very dissatisfied
☐ 5. No opinion

52 **(14) How satisfied are you with your counselor's willingness to listen to your ideas and suggestions when developing your rehabilitation plan and job goal?** *(Please check one)*
☐ 1. Very satisfied
☐ 2. Somewhat satisfied
☐ 3. Somewhat dissatisfied
☐ 4. Very dissatisfied
☐ 5. No opinion

53 **(15) How satisfied are you with your counselor's promptness in providing services to you?** *(Please check one)*
☐ 1. Very satisfied
☐ 2. Somewhat satisfied
☐ 3. Somewhat dissatisfied
☐ 4. Very dissatisfied
☐ 5. No opinion

54 **(16) Did your counselor arrange for you to have physical restoration services such as medical treatment, physical therapy, artifical limbs, eyeglasses, dentures, hearing aids, etc.)?** *(Please check one)*
☐ 2. No
☐ 9. I don't remember.
☐ 1. Yes

55 A. If yes, how satisfied are you with these services? *(Please check one)*
☐ 1. Very satisfied
☐ 2. Somewhat satisfied
☐ 3. Somewhat dissatisfied
☐ 4. Very dissatisfied
☐ 5. No opinion

56 **(17) Did your counselor arrange for you to have job training?** *(Please check one)*
☐ 2. No
☐ 9. I don't remember.
☐ 1. Yes

57 A. If yes, how satisfied are you with the kind of training you received? *(Please check one)*
☐ 1. Very satisfied
☐ 2. Somewhat satisfied
☐ 3. Somewhat dissatisfied
☐ 4. Very dissatisfied
☐ 5. No opinion

58 **(18) Did your counselor help you look for a job?** *(Please check one)*

☐ 2. No
☐ 9. I don't remember.
☐ 1. Yes

59 A. If yes, how satisfied are you with this help? *(Please check one)*

☐ 1. Very satisfied
☐ 2. Somewhat satisfied
☐ 3. Somewhat dissatisfied
☐ 4. Very dissatisfied
☐ 5. No opinion

60 **(19) How useful were the services or training you received from the rehabilitation program in helping you to get your present situation?** *(Please check one)*

☐ 1. The services or training were of great use.
☐ 2. The services or training were of some use.
☐ 3. The services or training were of no use at all.
☐ 4. I have no opinion.
☐ 8. I received no services or training from the rehabilitation program.

61 **(20) How useful were the services or training you received from the rehabilitation program in helping you to perform in your present situation (even if they were of little or no use in helping you get it?)** *(Please check one)*

☐ 1. The services or training were of great use.
☐ 2. The services or training were of some use
☐ 3. The services or training were of no use at all.
☐ 4. I have no opinion.
☐ 8. I received no services or training from the rehabilitation program.

62 **(21) How satisfied are you with your overall experience with the rehabilitation program?** *(Please check one)*

☐ 1. Very satisfied
☐ 2. Somewhat satisfied
☐ 3. Somewhat dissatisfied

63 **(22) Would you recommend your vocational rehabilitation agency to a disabled friend?** *(Please check one)*

☐ 1. Yes ☐ 2. No ☐ 3. No opinion

64 **(23) Who answered this questionnaire?** *(Please check one and fill in the blank)*

☐ 1. I, the former rehabilitation program client, answered this questionnaire by myself.
☐ 2. I, the former rehabilitation program client, answered this questionnaire with the help of another person.
This person is my: *(Please give relationship)* ________________
☐ 3. Another person answered this questionnaire for me. This other person is my: *(Please give relationship)* ________________

EXHIBIT 3 (cont'd.)

(24) Do you have any comments you wish to make about your case or the program, or is there anything else you think it would be useful for us to know ________________________________

____

____

____

____

____

65-66 How long did it take for you to fill out this questionnaire?

|__|__| Minutes

(26) Do you wish to be contacted by your vocational rehabilitation agency for further services? If so, please provide:

____
Name

____
State Address

____
City State Zip

____
Area Code Telephone Number

EXHIBIT 3 (cont'd.)

Table 21

Purposes of Specific Closure Survey Items

Item(s)	Purpose(s)
1	Pretest validity checkpoint of R-300 Part 3.I. for Standards 5(i) and 5(iii)
3	Pretest validity checkpoint of R-300 Supplement C+D Item R for Standard 5(ii)
4	Pretest validity checkpoint of R-300 Part 3.J. for Standards 4(i) and 5(ii)
5	To calculate Standard 4(iv) and to validate R-300 Supplement C+D Item Q
6	Pretest validity checkpoint for Closure Survey Item 5
7 - 12	To respond to Standard 5(iv)
2, 13 - 18A	To respond to Standard 8(ii) and as pretest validity crosscheck with Follow-up Survey Items 2, 16, 17, 18, 19A, 20A, 21A
19	To respond to Standard 8(iii) and as pretest validity crosscheck with Follow-up Survey Item 22
20	To respond to Standard 8(iv) and as pretest validity crosscheck with Follow-up Survey Item 23
21	To respond to Standard 8(i) and as pretest validity crosscheck with Follow-up Survey Item 24
22	To enable MEU's to use this Closure Survey to respond to current Standards
23, 24	Clarifying information desired by MEU's
25	To calculate pretest level of client effort
26	To respond to MEU's post-employment service information needs

Table 22

Closure Survey: Sampling Dimensions

	DE	MI	MS	OR	PA	VA
Final Sample (Goal: 300 Status 26's	142[a]	333	86[a]	300	300	301
100 Status 28's and 30's)	57[a]	189	26[a]	100	101	118
Number of Districts in State Involved/Total	3/3	8/42	19/21	32/32	3/15	19/61
Response Rate on Total	48%	80%[b]	66%[b]	57%[b]	70%[b]	46%

[a] Sample size reflects all clients closed in Statuses 26, 28, and 30 during the sampled quarter.

[b] Instituted recommended response rate assurance procedures.

Sample Representativeness:

DELAWARE	Sample seems to represent the fairly equal distribution of these three types of closures.
MICHIGAN	The clients about whom information was collected and who were subsequently included in the closure survey are believed to represent a good cross-section of all MBR 1st qtr. 26, 28, and 30 closures.
MISSISSIPPI	Statewide.
OREGON	Not applicable. Selection process inappropriate for sample size requested.
PENNSYLVANIA	Yes
VIRGINIA	Representative of volume of clients during the same period of time in 1979 Regions I and II.

- Implementing a telephone reminder to continued non-respondents the following week;
- Classifying unreturned surveys as non-responses two weeks later.

Although most states completed a few of the questionnaires over the telephone in order to check the respondents' level of comprehension and to identify problem questions in the instrument, Mississippi found it necessary to conduct a large proportion of its surveys through telephone and face-to-face interviews because of the primary disabling condition of its population (i.e., blind and visually impaired clients). This additional effort (not immediately evident in the labor estimates provided in Table 17) was possible because of the substantially smaller sample size in Mississippi. On average, the Closure Survey activity required 19 person days of PE Unit staff time to train, execute and analyze; however, neither clerical efforts nor clients' response time is included in these estimates.

Summary of Pretest Experience

As with the R-300 supplements, most state agencies felt that the sample selected for the pretest of the closure survey represented a good cross-section of the state VR population. While the usefulness of the closure survey was acknowledged by most of the MEU's, the time commitment involved in its administration was seen by some as being unnecessarily long. There was a great deal of time spent formatting, printing, distributing, collecting, and recording the data,and still the pretest process was hampered by high rates of non-response and missing data. To minimize non-response, the agencies contacted non-respondents via telephone interviews. Because of the problems communicating the closure survey over the telephone, the interview process slowed down and became burdensome and expensive.

As noted earlier, the detailed reviewer comments are presented in another report. However, below we summarize the most frequently mentioned problems and suggestions noted by reviewers about the closure survey.

- Larger type is needed to facilitate reading, especially by the visually disabled.
- Simpler language should be used to make the instrument more compatable with the reading level of the average client.
- The instrument's name and identification numbers should be placed on the cover to facilitate handling.
- The questionnaire is too long.
- A potential for bias exists due to the lack of response by certain types of clients.
- Clients give multiple responses to questions asking for a single response.
- Sometimes the available choices are not a complete list of possible responses.
- Use of a standardized form with options for additional unique state items at the end would seem to be an excellent format.

General Data Findings from the Pretest

Missing Data

The amount of missing data varies considerably among the survey's questions and among the states. Except for a few questions having enormous differences among the states, all the missing data percentages are stated ranges as observed across all the states (e.g., "3% to 15% missing data"). The excepting are noted below. Missing data is defined as either a non-response or a response of "don't know/don't remember." When the questions are compared according to the degree of missing data, three distinct clusters emerge, representing low, moderate, and high degrees of missing data. The item numbers used below refer to the numbering scheme on the West Virginia R&T version of the Closure Survey (Exhibit 3).

The low cluster includes questions 1 through 6, and 13 through 25. These items inquire about the client's current situation, employment, opinion of VR services and counselors, and overall satisfaction. Between 3% and 13% of the data for these items are missing.[1] These relatively small proportions are not likely to produce analytic difficulties.

The next group consists of questions 7, 8, 9, and 12, which focus on changes resulting from the rehabilitative program (changes in ability to care for oneself, feelings about oneself and one's future, and job-related skills. These items were missing between 20% and 25% of the data.

The highest proportion of missing data occurred on items 10 and 11. Together, these two items contain 27 subquestions on improvements in self-care and homemaking abilities. The data from Pennsylvania are not comparable to the other states' data because these two items were not asked of Pennsylvania clients who never had problems in these areas. Delaware and Virginia, which used the WV RTC format for these questions, had between 31% and 39% missing data. Michigan, which asked the identical questions with a different answer format, had missing data rates between 23% and 26%. This suggests that Michigan's format may be the less confusing of the two.

Moderate and high proportions (over 20%) of missing data can present problems for analysis. This problem is compounded by the fact that the six questions in this group (items 7 through 12) all respond to data element 5(iv), and they are the only ones on the Closure Survey to do so. This issue will be addressed by substituting the FAI/LSI items (to be pretested) for the items included in the pretest Closure Survey, to assess that data element. Further, the FAI/LSI items will be asked of the client in person at closure, and thus they need not appear in the Closure Survey at all.

---

[1] The Michigan instrument did not allow "I am not working" as a legitimate response to items 3 and 4 (Michigan items 2 and 3), which ask "hours worked" and "present earnings." Michigan's high rate of missing data (45% and 42%, for items 3 and 4, respectively) is presumably due to unemployed clients leaving the question blank.

Time Required of Survey Respondents

This analysis is unfortunately based on rather scanty data. Less than a third of the survey respondents answered the question on how much time was required to complete the form. Any conclusions must therefore be tentative. Pennsylvania did not request this information on its Closure Survey.

The data which are available indicate that, on average, it took respondents 15 to 20 minutes to complete the Closure Survey (Table 23). However, this figure is inflated by the few respondents who took much more time (up to an hour and 40 minutes) to fill out the form. Two more telling statistics are that half the respondents needed ten minutes or less, and 83% needed 20 minutes or less to complete the Closure Survey.

Suggested Revisions to the Closure Survey

In the previous section of this report, we recommended the elimination of data element 4(iv), and the "satisfied with present situation" item from 8(ii). We also recommended combining the counselor satisfaction items of 8(ii), and combining data elements 8(iii) and (iv). In addition, we recommend that no questions which duplicate R-300 information should appear on the Closure Survey; thus, we recommend deleting all survey questions pertaining to income, sources of financial support, and closure work status. Finally, the questions pertaining to functional abilities will be replaced by the functional assessment inventory (FAI) items soon to be pretested. These items will be asked directly of the client, rather than through a mailback survey, and thus can be deleted.

In effect, if our recommendations are followed, it means that the Closure Survey will be used solely for the purpose of addressing the satisfaction standard (#8). This will greatly shorten the survey, and should improve response rates. However, at the state's option, it may include questions on income, etc., if the state desires to use the survey as a validation procedure for its R-300 data. As well, the state, for its own purposes, may include the last few questions on the pretested survey which ask who completed the survey, how long it took, and whether further services are desired. However, all state agencies must use the

Table 23

Respondent Time Required to Complete the Closure Survey

	AVERAGE	MEDIAN	NO. OF CASES
Delaware	15.8	10.1	80
Michigan	14.1	9.5	269
Mississippi	21.8	15.4	66
Oregon	14.7	10.3	193
Pennsylvania[a]	-	-	-
Virginia	15.8	12.3	180

[a] Time requirements not asked of clients on Pennsylvania's version of the Closure Survey.

exact wording and order for those questions used to address Standard 8; any other questions must be appended to the core set of questions for that standard.

In keeping with our suggestions, we recommend that the following changes be made to the Closure Survey:

- delete questions 1 through 12;
- combine questions 13, 14 and 15 into a single question (satisfaction with counselor);
- retain questions 16, 17 and 18 (satisfaction with service);
- combine questions 19 and 20 into a single question;
- allow state agencies, at their option, to include questions 21 through 26 and other questions of interest to the agency following the core questions;
- finally, we recommend that all questions pertaining to satisfaction with services be reformatted to "yes-no" responses rather than "very satisfied, somewhat satisfied, . . ., very dissatisfied."

Our recommended questions for the revised Closure Survey appear in Exhibit 4.

Exhibit 4

Suggested Questions for the Revised Closure Survey

(1) Are you satisfied with your overall experience with the rehabilitation program? (Please check one)

___ Yes

___ No

___ Not sure or no opinion

(2) Are you satisfied with your counselor's performance (that is, did he/she do a good job for you)? (Please check one)

___ Yes

___ No

___ Not sure or no opinion

(3) Did your counselor arrange for you to have physical restoration services such as medical treatment, physical therapy, artificial limbs, eyeglasses, dentures, hearing aids, etc.? (Please check one)

___ No

___ I don't remember

___ Yes

If YES, are you satisfied with these services? (Please check one)

___ Yes

___ No

___ Not sure or no opinion

(4) Did your counselor arrange for you to have job training? (Please check one)

___ No

___ I don't remember

___ Yes

If YES, are you satisfied with the kind of training you received? (Please check one)

___ Yes

___ No

___ Not sure or no opinion

(5) Did your counselor help you look for a job? (Please check one)

___ Yes

___ No

___ Not sure or no opinion

If YES, are you satisifed with the help you received? (Please check one)

___ Yes

___ No

___ Not sure or no opinion

(6) Were the services or training you received from the rehabilitation program useful in helping you to perform in your present situation or in helping you get it? (Please check one)

___ Yes

___ No

___ I have no opinion

___ I received no services or training from the rehabilitation program

(7) (Other questions as desired by the state agency)

FOLLOW-UP SURVEY

The Follow-up Surveys were designed as a one-year post-closure mailout questionnaire for the purposes of documenting retention of benefits (economic and functional), client satisfaction, and service utility assessments. This information is to be used for the following purposes:

- to collect data from clients to respond to several Standards' data elements;
- to validate follow-up information generated within the follow-up instrument itself;
- to compare response rates and answers at follow-up with those received at closure.

An example Follow-up Survey appears in Exhibit 5. This Exhibit can be used in conjunction with Table 24, which specifies the purposes of each data item on the Follow-up Survey. Note that some items were redundant with the Closure Survey administered during the pretest. This was necessary to resolve the issues of (1) the optimal time to solicit certain information from clients, and (2) the relative validity of various information sources.

Data Collection Methodology

The data collection methodology stipulated two major follow-up activities:

- The first gathered 12-month follow-up information on 100 clients closed 26 during the first quarter of the preceding year, primarily to identify problems with the instrument and to get an estimate of one-year post-closure response rates and missing data.
- The second follow-up activity was directed toward the 300 clients closed 26 during the pretest and on whom Supplemental C&D and Closure Survey information had been collected. This latter group's responses would primarily constitute the data necessary to respond to the Standards.

2-5 Questionnaire No |__|__|__|__|

VOCATIONAL REHABILITATION SURVEY

6-MONTH FOLLOW-UP QUESTIONNAIRE

6-7 (1) **Which of the following statements best describes your present situation?** *(Please check only one box)*

☐ 1 I earn a wage or salary at a regular job.
☐ 2 I earn a wage or salary in a sheltered workshop (for example, a place like a workshop for the blind or Goodwill Industries).
☐ 3 I am self-employed.
☐ 4 I earn a wage or salary in a state-managed Business Enterprise Program (that is, a state-run program intended specifically for disabled people).
☐ 5 I am a homemaker (that is, a person whose primary work is taking care of the home).
☐ 6 I work on a family farm or in a family business without pay.
☐ 7 I am not working at present. I am: A student
☐ 8 I am not working at present. I am: Retired
☐ 9 I am not working at present. I am: A trainee
☐ 10 Other *(Please explain)* ________________________
____
☐ 11 My situation is not listed above. *(Please explain)*
____
____

8 (2) **How satisfied are you with your present situation?** *(Please check one)*

☐ 1. Very satisfied
☐ 2 Somewhat satisfied
☐ 3 Somewhat dissatisfied
☐ 4. Very dissatisfied
☐ 5. No opinion

9-10 (3) **About how many hours a week do you work?** *(Please check one and fill in the boxes)*

☐ I usually work about |__|__| hours a week.
☐ I don't know.
☐ I am not working.

11-13 (4) **What are your present earnings?** *(Please check one and fill in the boxes)*

☐ I earn $ |__|__|__| per week.
☐ I don't know.
☐ I am working but I don't receive a wage or salary.
☐ I am not working.

14-15 **(5) How long have you been in your present job?** *(Please check one and fill in the boxes)*

☐ I have had this job about |__|__| months.
☐ I don't remember.
☐ I am not working.

16-17 **(6) If you usually work, have you been out of work at any time during the last six (6) months?** *(Please check one and fill in the boxes)*

☐ No, I have not been out of work at any time.
☐ I don't remember.
☐ Yes, I was out of work for |__|__| weeks.
☐ I don't usually work.

18-19 **(7) What is your largest source of support?** *(Please check one)*

☐ 1. Current earnings from a job.
☐ 2. Earnings from interest, dividends, or rent payments.
☐ 3. Family and friends.
☐ 4. Private relief agency (for example, the Salvation Army, Goodwill Industries
☐ 5. Supplemental Security Income (SSI) for the Blind
☐ 6. Supplemental Security Income (SSI) for the Aged
☐ 7. Supplemental Security Income (SSI) for the Disabled
☐ 8. Aid to Families with Dependent Children (AFDC)
☐ 9. General Assistance (GA)
☐ 10. Other public welfare *(Please explain)* ____________________
☐ 11. Public institutions (for example, a tax-supported hospital, nursing home, treatment center, etc.)
☐ 12. Workers' Compensation
☐ 13. Social Security Disability Insurance Benefits (SSDI)
☐ 14. Veteran's Benefits
☐ 15. Private Insurance
☐ 16. Other: *(Please explain)* ____________________

20-23 **(8) How much income, if any, did you (or your dependents) receive last month from all sources of public welfare?** *(Please check one and fill in the boxes)*

☐ I received $ |__|__|__|__| last month.
☐ None
☐ I don't remember.

24-28 **(9) How much did you earn during the last six (6) months?** *(Please check one and fill in the boxes)*

☐ I earned about $ |__|__|__|__|__| during the last 6 months.
☐ I did not earn anything during the last 6 months.
☐ I don't remember.

EXHIBIT 213

29 **(10) When you finished rehabilitation services, was anyone in your family able to work or work longer hours at a job they already had because you were able to care for yourself?** *(Please check one)*

- ☐ 2. No
- ☐ 9. I don't know
- ☐ 1. Yes

30 A. If yes, is this still the case? *(Please check one)*

- ☐ 1. Yes
- ☐ 2. No
- ☐ 9. I don't know

31 **(11) How do you feel about yourself compared to 6 months ago?** *(Please check one)*

- ☐ 1. I feel the same about myself as I did 6 months ago.
- ☐ 2. I feel better about myself than I did 6 months ago.
- ☐ 3. I feel worse about myself than I did 6 months ago.
- ☐ 9. I don't know.

32 **(12) How do you now feel about your future, compared to 6 months ago?** *(Please check one)*

- ☐ 1. I feel the same about my future as I did 6 months ago.
- ☐ 2. I feel better about my future than I did 6 months ago.
- ☐ 3. I feel worse about my future than I did 6 months ago.
- ☐ 9. I don't know.

(13) Has your ability to perform any of the following functions of self-care changed at all during the last six months? *(Please check on the right side whether your ability to perform each item has stayed the same, improved or gotten worse during the last six months)*

		In the last 6 months my ability to	Has stayed the same	Has improved	Has gotten worse	Not sure
33	a.	Feeding	1. ☐	2. ☐	3. ☐	4. ☐
34	b.	Bathroom functions	1. ☐	2. ☐	3. ☐	4. ☐
35	c.	Taking medicine	1. ☐	2. ☐	3. ☐	4. ☐
36	d.	Grooming (shaving, hair care, make up, etc.)	1. ☐	2. ☐	3. ☐	4. ☐
37	e.	Dressing and undressing	1. ☐	2. ☐	3. ☐	4. ☐
38	f.	Moving my body weight	1. ☐	2. ☐	3. ☐	4. ☐

39	g.	Moving around the home	1. ☐	2. ☐	3. ☐	4. ☐
40	h.	Climbing stairs	1. ☐	2. ☐	3. ☐	4. ☐
41	i.	Reading	1. ☐	2. ☐	3. ☐	4. ☐
42	j.	Writing	1. ☐	2. ☐	3. ☐	4. ☐
43	k.	Talking	1. ☐	2. ☐	3. ☐	4. ☐
44	l.	Answering the phone	1. ☐	2. ☐	3. ☐	4. ☐
45	m.	Moving on the street	1. ☐	2. ☐	3. ☐	4. ☐
46	n.	Using public transportation	1. ☐	2. ☐	3. ☐	4. ☐
47	o.	Driving a car	1. ☐	2. ☐	3. ☐	4. ☐

(14) If you are primarily a homemaker, has your ability to do any of the skills and activities related to homemaking changed during the past six months? *(Please check on the right side whether your ability to do each of the items has stayed the same, improved, or gotten worse during the last six months.)*

	In the last 6 months my ability to		Has stayed the same	Has improved	Has gotten worse	Not sure
48	a.	Caring for children and family	1. ☐	2. ☐	3. ☐	4. ☐
49	b.	Caring for pets	1. ☐	2. ☐	3. ☐	4. ☐
50	c.	Cooking and fixing meals	1. ☐	2. ☐	3. ☐	4. ☐
51	d.	Washing dishes	1. ☐	2. ☐	3. ☐	4. ☐
52	e.	Cleaning house	1. ☐	2. ☐	3. ☐	4. ☐
53	f.	Doing laundry	1. ☐	2. ☐	3. ☐	4. ☐
54	g.	Shopping for food and groceries	1. ☐	2. ☐	3. ☐	4. ☐
55	h.	Running errands	1. ☐	2. ☐	3. ☐	4. ☐
56	i.	Budgeting and paying bills	1. ☐	2. ☐	3. ☐	4. ☐
57	j.	Taking part in neighborhood activities	1. ☐	2. ☐	3. ☐	4. ☐

EXHIBIT 5 (cont'd)

58 (15) **Has there been any change in your ability to do job-related skills and activities (like typing, using tools and machinery, assembly work, serving people, and so on) during the six months since you left the rehabilitation program?** *(Please check one)*

☐ 2. No, there has been no change.
☐ 9 I don't know
☐ 1. Yes, there has been a change

A. If yes, please list the skills or activities below, and check whether you have improved or gotten worse in it:

In the last 6 months my ability to	Has stayed the same	Has improved	Has gotten worse
____________________	☐	☐	☐
____________________	☐	☐	☐
____________________	☐	☐	☐

59 (16) **How satisfied are you now with the information provided by your counselor about your disability and the opportunities for improving your situation?** *(Please check one)*

☐ 1. Very satisfied
☐ 2. Somewhat satisfied
☐ 3. Somewhat dissatisfied
☐ 4. Very dissatisfied
☐ 5. No opinion

60 (17) **How satisfied are you now with your counselor's willingness to listen to your ideas and suggestions when developing your rehabilitation plan and job goal?** *(Please check one)*

☐ 1. Very satisfied
☐ 2. Somewhat satisfied
☐ 3. Somewhat dissatisfied
☐ 4. Very dissatisfied
☐ 5. No opinion

61 (18) **How satisfied are you now with your counselor's promptness in providing services to you?** *(Please check one)*

☐ 1. Very satisfied
☐ 2. Somewhat satisfied
☐ 3. Somewhat dissatisfied
☐ 4. Very dissatisfied
☐ 5. No opinion

62 (19) **Did your counselor arrange for you to have physical restoration services (such as medical treatment, physical therapy, artifical limbs, eyeglasses, dentures, hearing aids, etc.)?** *(Please check one)*

☐ 2. No
☐ 9. I don't remember.
☐ 1. Yes

63 A. If yes, how satisfied are you with these services? *(Please check one)*

☐ 1. Very satisfied
☐ 2. Somewhat satisfied
☐ 3. Somewhat dissatisfied
☐ 4. Very dissatisfied
☐ 5. No opinion

64 (20) **Did your counselor arrange for you to have job-training?** *(Please check one)*

☐ 2. No
☐ 9. I don't remember.
☐ 1. Yes

65 A. If yes, how satisfied are you with the kind of training you received? *(Please check one)*

☐ 1. Very satisfied
☐ 2. Somewhat satisfied
☐ 3. Somewhat dissatisfied
☐ 4. Very dissatisfied
☐ 5. No opinion

66 (21) **Did your counselor help you look for a job?** *(Please check one)*

☐ 2. No
☐ 9. I don't remember.
☐ 1. Yes

67 A. If yes, how satisfied are you with this help? *(Please check one)*

☐ 1. Very satisfied
☐ 2. Somewhat satisfied
☐ 3. Somewhat dissatisfied
☐ 4. Very dissatisfied
☐ 5. No opinion

68 (22) **How useful were the services or training you received from the rehabilitation program in helping you to get your present situation?** *(Please check one)*

☐ 1. The services or training were of great use.
☐ 2. The services or training were of some use.
☐ 3. The services or training were of no use at all.
☐ 4. I have no opinion.
☐ 8. I received no services or training from the rehabilitation program.

69 (23) **How useful were the services or training you received from the rehabilitation program in helping you to perform in your present situation (even if they were of little or no use in helping you get it?)** *(Please check one)*

☐ 1. The services or training were of great use.
☐ 2. The services or training were of some use.
☐ 3. The services or training were of no use at all.
☐ 4. I have no opinion.
☐ 8. I received no services or training from the rehabilitation program.

EXHIBIT 5 (cont'd.)

70 **(24)** **How satisfied are you with your overall experience with the rehabilitation program?** *(Please check one)*

☐ 1. Very satisfied
☐ 2. Somewhat satisfied
☐ 3. Somewhat dissatisfied
☐ 4. Very dissatisfied
☐ 5. No opinion

71 **(25)** **Would you recommend your vocational rehabilitation agency to a disabled friend?** *(Please check one)*

☐ 1. Yes ☐ 2. No ☐ 3. No opinion

72 **(26)** **Who answered this questionnaire?** *(Please check one and fill in the blank)*

☐ 1. I, the former rehabilitation program client, answered this questionnaire by myself.

☐ 2. I, the former rehabilitation program client, answered this questionnaire with the help of another person

This person is my: *(Please give relationship)* ____________

____

☐ 3. Another person answered this questionnaire for me. This other person is my: *(Please give relationship)*

____

(27) **Do you have any comments you wish to make about your case or the program, or is there anything else you think it would be useful for us to know** ______________________________

____

____

____

____

____

73-74 **(28)** **How long did it take for you to fill out this questionnaire?**

|__|__| Minutes

(29) **Do you wish to be contacted by your vocational rehabilitation agency for further services? If so, please provide:**

____
Name

____
State Address

____
City State Zip

____
Area Code Telephone Number

EXHIBIT 5 (cont'd.)

Table 24

Purposes of Follow-up Survey Data Items

Item(s)	Purpose(s)
1	Pretest validity checkpoint for Follow-up Items 3, 4, and 9
3, 4	To respond to Standards 2(iii), 2(iv) and 7(i)
5, 6	Pretest validity checkpoint for Follow-up Item 9 and Closure Item 1
7	To respond to Standard 7(ii)
8	Pretest validity crosscheck for Follow-up Items 4 and 7
9	To respond to Standards 2(iii), 2(iv) and 6(i)
10 - 15	To respond to Standard 7(iii) and as pretest validity crosscheck with Closure Items 7, 8, 9, 10, 11 and 12
2, 16 - 21A	To respond to Standard 8(ii) and as pretest validity crosscheck with Closure Items 2, 13, 14, 15, 16A, 17A and 18A
22	To respond to Standard 8(iii) and as pretest validity crosscheck with Closure Item 19
23	To respond to Standard 8(iv) and as pretest validity crosscheck with Closure Item 20
24	To respond to Standard 8(i) and as pretest validity crosscheck with Closure Item 21
25	To enable MEU's to use this Follow-up Survey to respond to current standards
26, 27	Clarifying information desired by MEU's
28	To calculate pretest level of client effort
29	To respond to MEU's post-employment service information needs

Table 25 illustrates the sample size, proportion of districts involved in each state's efforts, and the response rate achieved for the 12-month and 6-month follow-up activities by each MEU. The range of response rates was not as wide as with the Closure Survey, spanning 37% to 65% with an average of 51% for the 12-month survey, and from 43% to 73% for the 6-month survey. While adherence to the response rate assurance procedure did not affect the rates as dramatically as in the Closure Survey, the necessity in Mississippi to conduct telephone or face-to-face interviews with a large proportion of the visually impaired clients did have a positive impact on the return in that state. Despite this additional investment, the level of effort estimates presented in Table 17 do not reflect an increased total cost to the Mississippi MEU. In fact, at approximately 16 PE person days to train, execute and analyze the 12-month follow-up survey, Mississippi actually required less than the average 19 person days for this activity. It should be remembered that these estimates do not include clerical efforts or clients' response time.

Summary of Pretest Experience

As regards the overall process of the follow-up, the predominant concern of the MEUs was that the administration of the Follow-up Survey required a major time commitment that they felt may not have been justified by the results received. Even with many hours spent mailing, collecting, and processing the surveys, the problems on non-response were still evident. Even the time-consuming process of telephoning yielded few contacts.

The reactions to the Follow-up Survey itself closely parallel the reactions to the Closure Survey in their general tone. Four recurring problems stand out:

- larger type is needed to facilitate reading;
- many questions need to be reworded using simpler language;
- the questionnaire's name and identification numbers should appear on the cover;
- client non-response is a potential source of bias.

Table 25

12-Month and 6-Month Follow-up Survey: Sampling Dimensions

	DE	MI	MS	OR	PA	VA
12-Month Survey Final Sample (Goal: 100 Status 26s)	100	99	103	100	102	100
Response Rate	46%	59%	65%	37%	57%	41%
6-Month Survey Final Sample (Goal: 300 Status 26s)	125	326	86	300	261	301
Response Rate	43%	53%	73%	67%	59%	47%
Number of Districts in State Involved/Total	3/3	39/43	20/21	32/32	1/15	56/61

Sample Representativeness: (12-Month Survey)

DELAWARE	Distribution across three districts didn't represent entire year.
MICHIGAN	Sample not sufficiently large to make valid inferences about the total population of 2nd qtr. 26 closures.
MISSISSIPPI	Statewide.
OREGON	Not applicable.
PENNSYLVANIA	Questionable, sample too small; larger sample needed.
VIRGINIA	Representative of statewide volume of 26 closure status.

General Data Findings from the Pretest

Missing Data

Most of the items on the Follow-up Survey solicit essentially the same information as their counterparts on the Closure Survey, except, of course, that they pertain to a different time period. There are only three wholly new questions on the Follow-up.

For most of the repeated items, the proportions of missing data on the Follow-up Survey were about the same (within 5%) as on the corresponding Closure Survey items. The exceptions were items #11 and #12 (Closure Survey items #8 and #9) for which the missing data rate dropped by 8%, to 12% and 16%, respectively. In addition, the missing data rate on item #13 (Closure Survey item #10), dealing with improvements in self-care functions, dropped sharply from the 31%-39% range on the Closure Survey (for states using the West Virginia format) to 16%-23% on the Follow-up. This may be due to the simpler answer format used on the Follow-up. In the earlier discussion of the Closure Survey, it was noted that Michigan's lower missing data rate for this question was probably due to the clearer answer format on the Michigan instrument. The Follow-up Survey data tend to support this conclusion.

Three new questions were added to the Follow-up Survey. Item #5 asked how long the client had been in his present job, and item #6 asked if he had been out of work at all in the previous six months. The relatively low proportions of missing data for items #5 and #6 (11% and 12%, respectively) suggest that clients did not have much trouble answering these questions. This was not the case with the third new question (#9) which asked about earnings for the previous six month period. One fourth of the clients did not answer this question, perhaps because they could not remember.

Time Required of Survey Respondents

Table 26 presents the average and median times required by respondents to complete the Follow-up Survey. The average time ranged from 12.1 minutes to 20.5 minutes. The high figure found for Mississippi may result from the fact that the surveys were administered face-to-face, thus "forcing" clients to answer the maximum number of questions. As well,

Table 26

Respondent Time Required to Complete the Follow-Up Survey

	AVERAGE	MEDIAN	NO. OF CASES
Delaware	12.1	10.4	51
Michigan	12.8	10.3	51
Mississippi	20.5	15.5	55
Oregon	18.5	14.8	36
Pennsylvania	12.3	10.0	43
Virginia	12.5	10.3	48

in face-to-face interviews clients have an opportunity to request clarification of unclear questions. To the extent such clarifications were requested, time requirements would increase.

The minimum time required was two minutes; obviously, a client who declined to answer most questions. The maximum was 90 minutes.

Suggested Revisions to the Follow-up Survey

Many problems with the administration of the Follow-up Survey might be linked to problems with the instrument. Improving the instrument may lead to a faster, higher response rate, thus eliminating some of the above concerns. At the beginning of the pretest, the basic purposes of the Follow-up Survey were twofold:

- as a primary source for data elements 2(iii), 2(iv), 6(i), 7(i), 7(ii), and 7(iii); and
- as a back-up source for data elements in Standard 8.

As a back-up source for Standard 8, the Follow-up Survey is conceptually less reliable, less valid, and in practice produced a higher level of missing data than the Closure Survey. We recommend, therefore, eliminating all questions pertaining to client satisfaction from the Follow-up Survey.

We have recommended that data element 6(i) be eliminated from the Performance Standards. Further, for data element 7(iii), dealing with functional abilities, we have recommended substituting the Functional Assessment Inventory (FAI) and Life Status Indicator (LSI) items selected after pretesting. Data collection will be deferred until after the pretest. Also, regardless of the specific items chosen, those items will have to be converted into a format suitable for self-administration via a mail-back survey. Finally, in order to implement our recommendation for data element 7(ii) -- which requires a more detailed accounting of financial sources of support -- we will need to add a question on non-wage, private sources of income.

As with the Closure Survey, state agencies may add other questions to the Follow-up as they wish. However, all states must use the exact wording and order for the questions used to address the standards;

additional questions must be appended to the core set used for the standards.

Based on our suggestions, we recommend that the Follow-up Survey be changed as follows:

- retain question 1 (current employment situation) to "set the stage" for answering the survey;
- delete questions 2 and 3;
- retain question 4 (weekly earnings);
- delete questions 5, 6 and 7;
- retain question 8 (income from welfare);
- delete question 9;
- substitute the FAI/LSI items -- after they are pretested and converted to a self-administering format -- for questions 10 through 15;
- delete questions 16 through 24;
- allow state agencies, at their option, to include questions 25 through 29, and other questions of interest to the agency following the core questions;
- add a question on non-wage, private sources of income.

Our recommended questions for the revised Follow-up Survey appear in Exhibit 6.

Exhibit 6

Suggested Questions for Revised Follow-up Survey

(1) Which of the following statements best describes your present situation? (Please check only one)

___ I earn a wage or salary, either at a regular job or from self-employment

___ I earn a wage or salary in a sheltered workshop or BEP

___ I am a homemaker

___ I work in a family farm or business without pay

___ I am not working at present

___ Other (explain) ______________________________

(2) How much income, if any, did you or your dependents receive last month from all sources of public welfare? (Please check one and fill in the space)

___ We received $ __________ last month

___ None

___ I don't remember

(3) What are your total earnings (from a job, self-employment, sheltered workshop, or BEP)?

___ I earned $ ________ last week

___ I am working but I don't receive a wage or salary

___ I am not working

___ I don't know

(4) What was your income last month from private sources other than the earnings reported in Question 3? (For example, from rents, dividends, or private insurance.)

___ I received $ __________ last month

___ None

___ I don't remember

(5) (Functional Assessment Inventory (FAI) and Life Status Indicators (LSI) items selected after pretesting, and reformatted for self-administration)

(6) (Other questions as desired by the state agency)

VI. INVESTIGATING PROBLEMATIC PERFORMANCE: SUPPORTIVE EVALUATION USING A DATA-BASED DECISION SUPPORT SYSTEM

In the preceding two chapters we discussed the Performance Standards, their associated data elements, and the data collection instruments needed for their implementation. These standards, along with the Procedural Standards discussed in later sections, comprise the descriptive component of the overall standards system. From the descriptive analyses come simple assessments of states' performance in relation to expected performance levels. This information will provide an overall picture of state and program performance; but, by itself, such information provides only part of the data needs of the standards system. The primary intent of the standards system is to facilitate improvement in state performance. However, the descriptive data on state performance will not, in general, provide any clues as to why states exhibit less-than-adequate performance, or what actions might be taken to improve performance. Thus derives the need for a second, analytical aspect of the standards system.

We expect that the standards reporting system will provide clear indication that some agencies on some data elements will not have met their objectives for level of attainment. The standards system does not stop there, however, but instead moves to analyze causes for the problematic attainment and to develop corrective actions, using the supportive evaluation system. The main use of this system is to identify things the various actors in the VR system could do differently to improve the attainment of the state VR agencies. The purpose of the supportive evaluation system is to close the gap between reporting on the standards and actions based on the standards. The supportive evaluation system should:

- ensure that standards have a positive impact on state and program performance;
- provide an ability to pinpoint causes for problems in subunits' performance;

- identify strategies leading to enhanced performance; and
- identify appropriate policy recommendations and program actions which can be taken by state agencies, RSA, or Congress, based on the analysis and aimed at improvement in state performance.

Achievement of these objectives will require synthesis of analytic research techniques, first-hand familiarity with program operations, and a sensitivity to policy concerns. Sensitivity to policy concerns is perhaps the most important consideration in terms of the overall design of the supportive evaluation model. Decisions are made by program managers, be they within RSA or within state agencies. Supportive evaluation is intended to inform decisions aimed at alleviating observed problems in agency performance. As such, the overall supportive evaluation model must first and foremost address the information needs of program managers. What this means in practical terms is that, at a minimum, program managers must be provided with information that is:

- relevant to the issues (i.e., problem) under consideration;
- quickly and easily interpretable;
- timely; and
- suggestive either of an immediate policy response to the problem, or of further investigation needed before an appropriate response can be formulated.

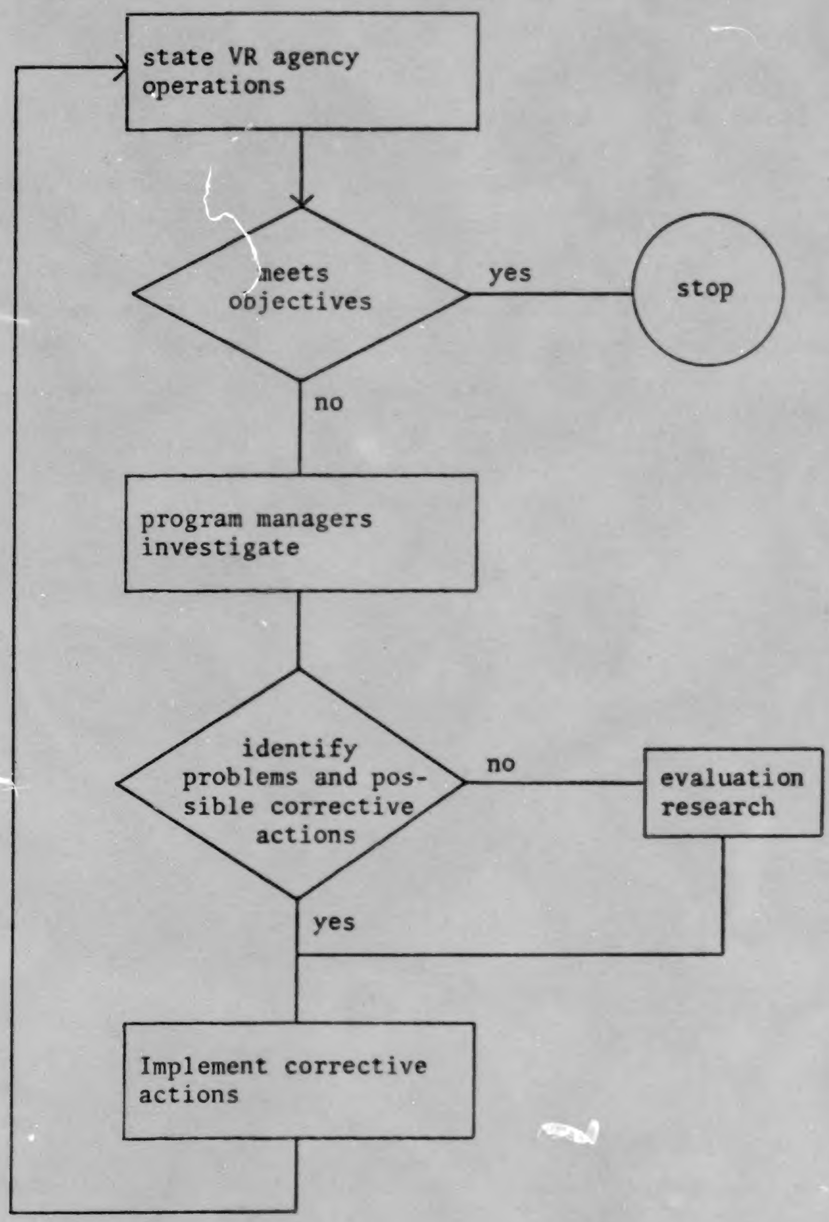
With design of such a system, program managers are provided with a tool for using program data to move from problem identification, to analysis of causes for problem performance, to programmatic actions that are based on the program data and are aimed at alleviating the problem performance. Thus, the supportive evaluation design comprises a data-based, decision support system.

GENERAL PROCESS FOR CONDUCTING SUPPORTIVE EVALUATION

The basic flow of the supportive evaluation system is shown in Figure 3. Problematic attainment, where an agency is unable to meet its agreed-on objective for a particular standard data element is the signal for the process to start. First, program managers, within RSA and within the

Figure 3

The Flow of the Supportive Evaluation System


state VR agency operations
meets objectives
yes
stop
no
program managers investigate
identify problems and possible corrective actions
no
evaluation research
yes
Implement corrective actions

state VR agencies, investigate the problematic attainment. If they are able to identify problems and possible corrective actions, then implementation is the next step. If not, then more formal evaluation research is called for. Implementation of the corrective actions will affect state VR agency operations in the next cycle of the standards system. As a result of the corrective actions the agency may be able to meet its objectives. Otherwise, the cycle starts anew.

As noted, the investigation of problematic attainment has been broken into two parts:

- basic problem identification, carried out by program managers within RSA and within the state VR agencies, using the standards and MIS reporting systems plus the managers' knowledge of program operations, and resulting in immediate corrective action; and
- evaluation research, carried out by evaluation researchers within RSA or within the state VR agencies, or by outside consultants, using the proposed MIS and other data bases as well as requiring primary data collection, and requiring some time lag before corrective action can be formulated and implemented.

These two parts differ then in who carries them out, but especially to the extent that the basic problem identification occurs in a timely fashion, using the reporting system and the MIS. If evaluation research is required, then most likely corrective actions will not be possible in time for the next cycle of the process. In fact, the results of the evaluation research may not be available for a year or more, given the nature of evaluation research. This lag is the reason that the investigation of problematic attainment is broken into two parts, so that timely corrective actions can be taken, if possible. However, the division between these two types of investigation is not absolute -- there is some overlap. This chapter focuses on the basic process of problem investigation and is organized as follows:

- a general model of the thinking process that managers would undertake to investigate the causes of problematic attainment is presented first; and
- two examples of how the thinking process would be applied to data on the revised standards are given next.

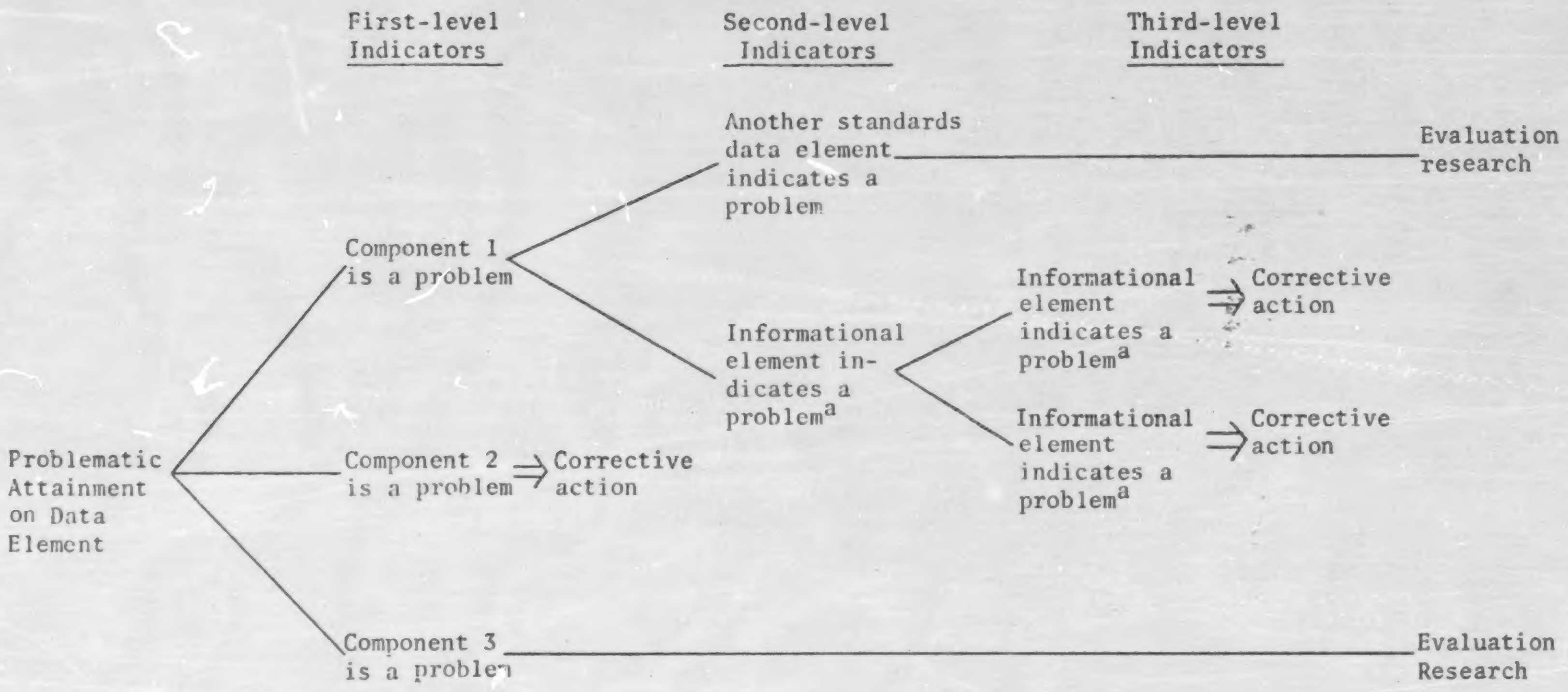
THE PROCESS OF PROBLEM IDENTIFICATION

The process of problem identification outlined below is to be carried out by program managers, within RSA and within state VR agencies. The information for the problem identification will come from the standards reporting system, as well as from the managers' knowledge of program operations. The process consists of tracing the possible problems by first organizing the components of the standard, then examining as second-level indicators other standards' data elements and other informational elements of the reporting system. Examination of these will then lead to further examination of third-level indicators, and so on. At any point in tracing out these indicators the problem may be identified to the manager's satisfaction. At that point, corrective action is formulated. Or, at any point in tracing out these problems, further analysis in the form of evaluation research may be required. This process can be shown as a tree, not unlike a decision tree, as in Figure 4. Of course, the process of problem identification may lead down several paths at once. The point is to do the analytical thinking and utilize existing information to identify possible problems and corrective actions. Also, more than two paths may need investigation from a particular node, and more than three levels of indicators may have to be examined. Below, the specifics of this process are further delineated.

If a data element shows problematic attainment, the first level of analysis is to examine the components of the element, dissecting the ratio or measure into its separate parts, to pinpoint the areas needing attention. For example, if the numerical value of a ratio is too large, the problem may be in the numerator (too large), the denominator (too small), or both. Comparison of performance on the data elements or their components with that of other agencies with similar programs, or historically, or on other data items, can help determine the extent to which the indicator shows a real problem, or if there is a good explanation for the performance. The goal in this analysis is to seek explanation, or the identification of which components or related measures pinpoint the areas to be explored further. This analytical process may take several iterations before a cause is pinpointed. The first levels of the process are not to be seen as complex statistical analysis problems but, rather, straightforward,

Figure 4

Process of Problem Identification



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[a] An "informational element" is a piece of data that comes from the MIS or other reporting system, but is not a standards data element.

simple program comparisons which allow people to progress through a decision-tree, diagnosing problems and using program information to reach conclusions about probable causes. Some branches of a decision-tree process may lead to problems or investigations which require complex statistical analyses, but only several levels into the process.

Table 27 shows the decision-steps in an example exploration; this is a model for investigating the possible causes or problems if "expenditures per 26 closure" (Data Element 2ii) is problematic.

The columns showing "first level indicators" shows four possible combinations of two other indicators, cost/closure and cost/case, which we suggest using in conjunction with an unacceptable (high) value of data element 2ii. Depending on acceptable or unacceptable levels of these indicators, a different "scenario," or type of problem, is identified. For instance, if both of these indicators are "acceptable," then this indicates that the agency is achieving a proportion of 26 closures which is too low. This can be confirmed by referring to Standard Data Element 3i. If cost/closure is unacceptable, but the cost/case is acceptable, then the agency is achieving too few closures. As can be seen here, this first level diagnosis leads to in-depth investigation of different parts of the system. The table shows the types of second- and third-level questions that could be pursued, depending on the initial comparisons and explanation.

At each level of the investigation, the goal should be to quickly and more finely hone in on the precise nature (i.e., cause) of the problem. Depending on the findings generated by a given level of the analysis, the program manager may decide either: that further investigation is warranted before formulating a policy response; that the findings are adequate to suggest an appropriate response; or that, despite the adequacy of the findings, no useful policy response can be offered (e.g., due to prior institutional, legislative, or funding constraints). In the discussion which follows, we illustrate the chronology of thinking and analysis which should occur prior to the formulation of a policy response, using numerical examples from the MEU data collected for the pretest or available from reports.

Table 27

Investigating Inadequate Performance on Data Element 2(ii): Expenditures Per 26 Closure

Scen-ario	First Level Indicators		Implications of First Level Indicators	Second Level Indicators	"Leading Questions" (and answer)	Third Level Indicators (if applicable)	Research Questions
	Cost/Closure	Cost/Case					
1	Acceptable	Acceptable	Agency is achieving too low a proportion of 26 closures	Standards Data Element 3(i) $\left(\frac{\#26}{\#26+\#28+\#30}\right)$	Is the % too low? If yes, why?	None (go to next column)	Conduct Outcomes Analysis
					If no, which clients or components cost too much?	• Administration costs	1. What proportion of total costs go to administration?
						• Service costs to: -- 26s -- 28s and 30s -- 08s (Abt MIS E4)	2. What is the average life-of-case cost for each closure group? 3. What proportion of total life-of-case costs are spent on each closure group?
						• Service costs by service type	1. What proportion of current service costs went to each service type? 2. What is the average cost of each service type, for clients receiving that service?
2	Un-acceptable	Acceptable	Agency is serving clients too slowly: achieving too few closures	Abt MIS element E 11: Post-Acceptance Closure Rate $\left(\frac{\#26+\#28+\#30}{\#\text{ open cases}}\right)$	1. Is the service process too slow?	1. Timeliness 10-12/12-24 R-300 item 3,M,2: Average time from acceptance to closure (10-24)	Which aspect of services for accepted clients takes relatively too long?
					2. Have we had a recent influx of acceptances?	Abt MIS element E9: rate of acceptance	None (end of investigation)
3	Acceptable	Un-acceptable	Agency has recently developed a bottleneck in intake process: too few clients being accepted into the system	1. Standards Data Element 1(ii) $\left(\frac{\#\text{ served (10-30)}}{\text{100,000 population}}\right)$ 2. Abt MIS Element E9: Rate of Acceptance $\left(\frac{\#\text{ of new status 10s}}{\#\text{ new applicants} + \#\text{ on-hand applicants} + \#\text{ on-hand 06s}}\right)$	1. Do we have too few applicants?	# of applicants (From RSA-101)	Could outreach be made more effective?
					2. Does use of Extended Evaluation account for the low acceptance rate?	1. R-300 item 3MI TIP06 (06 takes too long) 2. Abt E9c: % 02 => 06 (too many enter 06)	1. What kinds of clients are going into 06? 2. What kinds of services are provided during 06?
					3. Do we have too many in-eligible applicants?	Abt MIS E9c: 02 => 08 and Abt MIS E9g: 06 => 08	1. What reasons are given for closing clients ineligible? 2. From where are these clients being referred?
4	Un-acceptable	Un-acceptable	Agency has both an intake and a timeliness problem	Same as 2 and 3	Same as 2 and 3		

EXAMPLES OF THE PROCESS OF PROBLEM IDENTIFICATION

The discussion presents two working examples of the supportive evaluation process. These two examples include investigating a program-related data element (Standard 2(ii), cost per 26 closure, which was used also for Table 27) and a client-related data element (Standard 5(i), percent 26 closures competitively employed). These analyses will include indicators from the Management Information System (MIS),[1] standards' data elements, and information contained on the R-300, RSA-2, and RSA-101. Clearly, timely analysis will rely on the availability of such reports without extensive delay.

As will be shown, the indicators used in the investigation of problem performance are grouped and sequenced in such a way as to answer increasingly detailed questions. This allows managers to go a fair distance in determining the nature of the problem before needing recourse to more sophisticated and time-consuming "causal" analyses (that is, evaluation research). This is not to say that more sophisticated analyses are undesirable or unnecessary. On the contrary, they as often as not may prove useful to managers in pinpointing precise causes of problem performance. However, the advantage of this model is that it allows managers to quickly investigate and discard certain hypotheses regarding the problem's cause, and therefore to more quickly direct the investigation toward what seems to be the likely cause. Once the likely cause is identified through use of the indicators, the manager can direct his evaluation/research staff to conduct the needed causal analyses.

One important point must be made before this presentation of the investigation process can begin. In our examples, we will use actual results from the MEUs obtained in the pretest of the Performance Standards. The purpose is not to judge agency performance or attempt to alter current practice, but rather to offer a more concrete example of the use of the system. The conclusions we present only reflect the amount of information available to us, and should be interpreted only to the extent that they follow from the results presented. Moreover, there were no objectives set for these agencies. The attainment of an agency on a data element really has no meaning without a comparison to what was expected of an agency. That is, a low value on a data element might or might not indicate problematic attainment. With this in mind, let us turn to a specific example using data element 2(ii), costs per 26 closure. But, remember that the analysis is hypothetical.

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[1] As proposed by Abt Associates.

An Agency-Level Data Element

The Problem

In investigating the performance of pretest agencies on Standard 2(ii), shown in Table 28, the program manager finds the following performance for these three states:

Table 28

Cost Per 26 Closure

Delaware	$ 4,461.30
Pennsylvania	$ 2,408.64
Virginia	$ 3,892.78

From this table, we see that one state, Delaware, has an unusually high cost per 26 closure.[1] Pennsylvania and Virginia are located in the same region, and are used for comparison purposes.

First Level Indicators

In order to analyze performance on this data element, the program manager must attempt first to determine which of the data element's components explains "the problem": specifically, has the agency failed to obtain a large enough number of 26 closures (i.e., the denominator is small relative to the numerator)? Or, alternatively, does the agency have a problem controlling its various costs (numerator large relative to denominator)? It may appear that, in the context of this data element, the two issues are interrelated and inseparable: if costs per 26 closure are high, then by definition the agency has both "lost control" of its costs relative to the number of 26s produced, and it has failed to produce an appropriate number of 26s given its expenditure level. However, despite the intuitive sense of this linkage, we feel that the numbers and cost questions can and need to be separated in analyzing the data element. This will be shown below.

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[1] In an actual state investigation, the manager could use additional information such as our comparisons to past agency performance, other similar agencies, performance expectations or other baseline data in addition to relying only on the Standards' performance level. In our analysis, we rely solely on the pretest data.

The method developed for analyzing this data element is as follows: First, we make a preliminary assumption that the problem lies in the agency's "26 factor"; that is, in the speed and frequency with which the agency produces 26 closures. Only if the first and second level indicators suggest no production (26s) problem, will the manager undertake a cost analysis.

Thus, the first question the manager asks is "why do we have so few 26 closures?" One way to analyze this question is to place it in the context of a client flow problem. That is, the agency's low number of 26 closures may be the result of some bottleneck or failure in the service process. This is the approach taken below, which identifies four separate flow problems (moving from the latest to the earliest phases of the service process):

1. The agency is rehabilitating too small a proportion of its accepted closures.
2. The agency is achieving too few closures, in general, due to bottlenecks in the service process for accepted clients (timeliness problem). Stated from a different focus, the accepted clients of the sub-unit are spending relatively longer periods of time in the various service statuses. This reduces the pool of clients nearing closure, and thus reduces the pool of potential 26 closures.
3. The agency is accepting too few clients, thus cutting off the flow of potential 26 closures (intake problem).
4. The agency has both an intake and a timeliness problem.

The manager can test each of these hypotheses by looking simultaneously at two related indicators: total costs per closure; and total costs per accepted case. These two indicators use the same numerator (total expenditures) as is used in data element 2(ii). However, they "spread" the expenditures over larger groups, and by analyzing the size of those larger groups in relation to expenditures, the manager gets an idea of what (if any) kind of flow problem exists.

The results of this investigation follow:

Table 29

Cost Per Closure and Cost Per Case

	Total Cost/Closure	Total Cost/Case
Delaware	$3,428.60	$1,573.69
Pennsylvania	1,757.51	714.58
Virginia	2,429.91	1,108.10

(Available on the RSA-2 and RSA-101)

Based on Delaware's comparison to the other two agencies, the program manager concludes that Delaware has both an unacceptably high cost per closure and cost per case. The former suggests that clients are moving through the service statuses at a slow pace (a service bottleneck, due to a timeliness problem or to an increased provision of long term services). The latter suggests the existence of an intake bottleneck.

Second Level Indicator for Investigating High Cost Per Closure

As a rough test of the existence of service bottlenecks (as evidenced by a high cost/closure), the program manager turns to the second level indicator, Post-Acceptance Closure Rate (MIS element E11). This indicator compares the number of cases closed during the reporting period to the number of open cases. If this ratio declined over time it would indicate a slowing trend in the flow of closures. For any given reporting period, a low ratio -- "low," that is, in relation to other baseline figures -- indicates a service flow which is "too slow," and perhaps in need of adjustment.

The results of MIS element E11 follow:

Table 30

Post-Acceptance Closure Rate

Delaware	.847
Pennsylvania	.685
Virginia	.838

(Available on the RSA-101)

Based on Delaware's comparison to the two other agencies, and in the absence of other baseline information, the Post Acceptance Closure Rate is found to be within acceptable bounds. This rejects the service bottleneck hypothesis. The manager would then examine past data on the number of applicants desiring VR services to see if a recent influx of applicants is skewing the results to make it appear that the cost/closure is problematic. (We do not have the historical data to make this examination.) If this does not explain the high cost per closure, then the program manager would assume it to be a cost problem and investigate from that angle.

Second Level Indicator for Investigating High Cost Per Case

The next situation to be examined is Delaware's high cost per case. It is possible that the high cost per 26 closure may be the result of an intake bottleneck -- that is, the number of the closures is low because the agency is accepting too few clients into service, thus cutting off the flow of potential 26 closures. As the first test of this hypothesis, the manager looks at the agency's rate of acceptance -- MIS Element E9. The results of this investigation follow:

As the first test of this hypothesis, the manager looks at the agency's rate of acceptance -- MIS Element E9. The results of this investigation follow:

Table 31

Rate of Acceptance

Delaware	.389
Pennsylvania	.525
Virginia	.435

Before concluding that Delaware has an intake bottleneck, the program manager will also want to examine the accepted VR population relative to the state's population (number served per 100,000 population, Standard 1, data element ii). This investigation reveals the following:

Table 32

Number Served Per 100,000 Population

Delaware	404.6
Pennsylvania	690.6
Virginia	474.1

Based on a low rate of acceptance and a low number served per 100,000 population, the program manager concludes the existence of an intake bottleneck, and turns toward an investigation of the intake process.

Third Level Indicators and "Leading Questions"

There are three possible explanations of this intake problem. They are:

- Are there too few applicants?
- Is there an overuse of the extended evaluation status?
- Are there too many ineligible applicants?

To examine the role the use of extended evaluation played in the low acceptance rate, the program manager must answer two questions:

- Were too many clients placed into extended evaluation?
- Did they stay too long?

To answer the first question, the manager examines the percentage of clients placed into extended evaluation. The results are:

Table 33

Percent of Clients Placed in 06

Delaware	16%
Pennsylvania	1.2%
Virginia	6.5%

(Available on the RSA-101)

While a determination that status 06 has been overused would also be based on the historical use of status 06 in Delaware and the types of disabilities common to 06's, the results seem to indicate an unusually high percentage of clients placed in extended evaluation. (This might be investigated further by obtaining data on the average time in status for 06 clients.) Suffice to say that the available figures seem to indicate an overuse of status 06. However, the knowledge of program may indicate that this is not the case, or that evaluation research is required to answer the issue.

In addition to the findings concerning the use of extended evaluation, the manager will also want to look at the percentage of ineligible applicants. This investigation reveals:

Table 34

Percent Closed 08

Delaware	39.3%
Pennsylvania	31.8%
Virginia	41.6%

(Available on the RSA-101)

Based on these figures, the percentage of clients declared ineligible for services does not appear to be a source of the intake problem.

The last area to be investigated in the effort to locate the source of the intake bottleneck is the number of applicants for VR services. This information is heavily dependent on historical information which is unavailable to us, but for the purposes of example we will use the state population as a guideline to allow for an across-states comparison.

Table 35

Applicants as a Proportion of Population

	Applicants	State Population	$\frac{\text{Applicants}}{\text{State Population}} \times 100$
Delaware	2,510	582,000	.43%
Pennsylvania	62,627	11,731,000	.53%
Virginia	23,419	5,197,000	.45%

(Available on the RSA-101 and Census Projections)

Based on these results, the following conclusions can be drawn concerning the intake process in Delaware:

- The number of applicants could be a source of the problem, depending on the numbers of applicants in past years. If this turns out to be a problem, then the program manager will want to examine outreach methods to see if they can be made more effective.
- The extended evaluation status seems to be overused, thus reducing the overall acceptance rate. Average time in this status also needs to be investigated. If this turns out to be a problem, then the manager will want to examine the types of clients that are being placed in 06, as well as the kinds of services that are being planned.
- The number of clients declared ineligible for services does not appear to be a source of the intake problem.

A Client-Level Data Element

In this discussion, we present another example of the process to be used by program managers in investigating problem performance, this time using a client-level data element instead of an agency-level one. (Again, we should remind the reader that the results shown are taken from our pretest results, but we do not attempt to make firm conclusions concerning agency performance in the absence of other important information. Use of these results is intended solely for example.)

The Problem

In the results of Standard 5(i), the program manager finds that three states show unusually low performance. These states are Virginia, with 74% of its 26 closures being competitively employed; Pennsylvania, with 73.3%; and Mississippi, with 42.4%. The determination that these readings may be problematic is based on comparison with past performance, other similar sub-units of the program, performance expectations, and other baseline data (the results of the three states to be investigated here are simply the lowest three of six pretest states. They do not reflect the above considerations, since that information is not available.)

First Level Indicators

The potential problem identified is that a significantly large proportion of 26 closures are not being placed into competitive employment. With this in mind, the first question asked by the program manager is "What happened to those non-competitively employed 26 closures?" To answer this, the program manager goes to the R-300's for 26 closures and selects for work status at closure (R-300 item 3I).

This investigation reveals the following information:

Table 36

Non-competitive Closures

	Virginia	Pennsylvania	Mississippi
Sheltered Workshops	11.3%	.7%	11.1%
Business Enterprise Program	-	-	2.2%
Homemakers	13.6%	26%	43.3%
Unpaid Family Workers	1.1%	-	1.1%
TOTAL	26%	26.7%	57.7%

(Available on the R-300)

Of course, this information cannot be interpreted independently; it needs a qualifier to put it in the necessary context. Once the program manager knows where the non-competitively employed 26 closures went, the next question to be answered is "Are these non-competitive closures appropriate?" More important, "Is this what the clients wanted?" To answer this, the program manager again goes to the R-300's for 26 closures, and gets vocational goal vs. outcome information (Standard 5(iii)).

The findings from this investigation follow:

Table 37

Vocational Goals and Outcomes

	Virginia	Pennsylvania	Mississippi
Competitive Goal	80.5%	76.0%	45.5%
Non-Competitive Goal	19.5%	24.0%	54.5%
Competitive Outcome	74.4%	73.3%	42%
Non-Competitive Outcome	25.6%	26.7%	58%
Competitive Goal - Competitive Outcome	71%	73.0%	38.6%
Competitive Goal - Non-Competitive Outcome	9.5%	3.0%	6.8%
Non-Competitive Goal - Competitive Outcome	3.4%	.3%	3.4%
Non-Competitive Goal - Non-Competitive Outcome	16.0%	23.7%	51.1%

With this information being used in conjunction with the work status at closure (see previous table), the program manager is now in a position to make some conclusions about agency performance.

Virginia

On the surface, the "under-achievement" factor (competitive goal and non-competitive outcome) seems to be very high (9.5%). But also notice that Virginia has the highest percentage of clients desiring competitive employment as their vocational goal. In the absence of information of past performance (and performances of other states), Virginia seems to have encouraged many of their clients to strive for competitive employment. While a large percentage of clients desiring competitive employment did not achieve this (9.5%), Virginia seems to have made an effort to maximize their rate of competitively employed 26 closures. Of those not competitively employed, they are almost evenly distributed between sheltered workshop employees and homemakers. This would indicate that there is no "creaming" of clients into the homemaker status. Based on these considerations, Virginia's performance on this data element does not appear to be problematic.

Pennsylvania

Pennsylvania shows a high correlation between vocational goal and outcome. The "over-achievers" (clients with non-competitive goals and competitive outcomes) and "under-achievers" (competitive goals and non-competitive outcomes) have been minimized. Upon seeing the high correlation between goal and outcome, the program manager would want to examine this for other similar states as well. The manager might find that few states have such a high goal-outcome correlationship, since it is perfectly acceptable for client's and counselor's views on an appropriate vocational goal to change as the program progresses. If this investigation reveals a potential problem, the manager might want to go to another step and examine the cost per closure (available on RSA-101 and RSA-2) to see if the effort is being made to persuade clients to strive for a higher goal. This potential lack of effort is reflected in another area that may be problematic, the use of the homemaker status. Here we find that practically all of the non-competitive closures were closed as homemakers (26% homemakers out of 26.7% non-competitively employed). As such, some (hypothetical) recommendations for action are possible:

1. Persuade counselors and clients to strive for a higher closure status than the goal mandates. Instill in them that changes in vocational goals are natural and not automatically undesirable.
2. Tell counselors, possibly through a directive, not to overuse the homemaker status. Counselors must attempt to use the other non-competitive statuses, or try for competitive employment.

Mississippi

Mississippi shows the highest percentage of clients desiring non-competitive employment. Over 50% of Mississippi's 26 closures desired, and achieved, non-competitive employment. Most of these were homemakers (43.3%), or employees in sheltered workshops (11.1%). But for a blind agency, is a figure of 42% appropriate for competitive employment, or too low? (At this point, the program manager would want to compare the percentage of competitively employed 26 closures in Mississippi to another similar blind agency. In our pretest, there were no other blind agencies. But. for the purposes of this exercise, let us assume that 42% is too low and that the result could be improved. Also, exogenous factors in Mississippi might influence the possibility for competitive employment. All these factors would influence an actual investigation.) Hypothetical recommendations for action follow:

1. Tell counselors to try to get clients to strive for competitive employment. Counselors must try to convince blind people that competitive employment is possible.
2. If this approach does not work, issue a directive limiting the number of clients with non-competitive goals. Have counselors tell applicants they cannot receive services if they do not try for competitive employment.

Conclusions

These two examples show how the standards information, combined with investigative logic, can enable managers, assisted by their program evaluation units, to hone in on the specific problems reflected in general program indicators. Supportive evaluation is a term that covers the activity of using standards information and other program information, to do analysis using program data to support management decisions, in order to answer questions about the state's performance in the provision of rehabilitation services and to improve that performance. Through the creative use of this approach to employing program information, managers and evaluation staff can work jointly in the identification of practices and environmental conditions affecting performance.

VII. PRETESTING THE PROCEDURAL STANDARDS: BACKGROUND ON THE STANDARDS PRETEST PROCESS, AND ANALYSIS OF PRETEST DATA

This and the next two chapters report on the pretest activities involving the four Procedural Standards. The Procedural Standards are treated separately from the Performance Standards since they pertain to service methods and processes, rather than service outputs and outcomes; and because of their different data requirements. But our basic concern in these chapters is the same as in Chapters IV and V: to develop recommendations for a refined system of Procedural Standards data elements, based on synthesis and consideration of the comments received from all our reviewers. The proposed Procedural Standards are as follows:

Procedural Standards

9. Information collected on clients by the R-300 and all data reporting systems used by RSA shall be valid, reliable, accurate, and complete.
10. Eligibility decisions shall be based on accurate and sufficient diagnostic information, and VR shall continually review and evaluate eligibility decisions to ensure that decisions are being made in accordance with laws and regulations.
11. VR shall ensure that eligibility decisions and client movement through the VR process occur in a timely manner appropriate to the needs and capabilities of the clients.
12. VR shall provide an Individualized Written Rehabilitation Program for each applicable client, and VR and the client shall be accountable to each other for complying with this agreement.

We shall present a thorough discussion of each of these standards, including:

- The rationale for each standard;
- The data collection methodology and the process for analyzing the data;

- A synthesis of comments received from the MEU's, program evaluators, and reviewers, along with our responses and recommendations in light of the comments;
- Analysis of the pretest data provided by the San Diego State University Case Review Project; and
- Summary recommendations for the system design.

Before we begin discussion of the individual standards, some background is needed into the overall Procedural Standards system. In this section we discuss a variety of issues relevant to the Procedural Standards pretest. First, we discuss the standards themselves: what they are; why they are needed to facilitate achievement of RSA's broad goals;[1] and the data sources used to assess performance on the standards. Next, we discuss the general process by which the Procedural Standards data was collected, and the time investment required to collect the data. Last, we discuss general issues regarding the analysis and interpretation of the pretest data.

THE PROCEDURAL STANDARDS

The Procedural Standards we have recommended within the standards system are intended as a method of ensuring attention to three critical process areas, and to data validity. It is intended for states to use the Procedural Standards to benefit their program evaluation efforts and facilitate the improvement of services to clients. These procedures will form the basis for agency decisions to make appropriate changes in practices, where current processes are not in keeping with client interests and positive program performance.

The recommendations for the Procedural Standards reflects the desire to allow maximum flexibility to states in the VR process, yet still ensure attention to the areas addressed by the Procedural Standards and provide sufficient data in these areas to allow for programwide analysis. Ideally, a uniform procedure would be followed by all states for monitoring these process areas, even though states retain differences in the ways they organize and conduct case service delivery. Indicators of compliance with legal requirements, such as eligibility and IWRP, should be the same for all states, i.e., the same questions should be asked and the same summary data should be reported.

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[1] As discussed in Chapter III.

Most of the needs of the Procedural Standards are best met through case review. Thus, we are recommending that a single case review process be implemented to address the case review needs of all four of the Procedural Standards. We recommend that the Case Review Schedule (CRS), developed by the San Diego State RCEP IX, be used as the basic document for Procedural Standards data collection. The CRS has already been mandated by RSA as the standardized instrument to be used by regional RSA offices whenever they conduct case reviews.[1] For Procedural Standards 10 (eligibility) and 12 (IWRP), BPA has selected the CRS items which we consider essential to adequately assess compliance. These items make up the Modified CRS, which is considerably shorter than the full CRS. RSA could choose either the CRS or the MCRS as the instrument for collecting Procedural Standards data.

While the CRS is an appropriate vehicle for collecting compliance data, it lacks certain items needed to assess the validity of R-300 data (Standard 9) or to assess timeliness of case service (Standard 11). For these standards, BPA developed separate instruments to complement the CRS. If the Procedural Standards are implemented, these two instruments would be incorporated directly into the CRS to provide a unified data collection instrument.

Having described the general thrust of the Procedural Standards and the general process for collecting the needed data, we turn next to a discussion of the individual standards.

STANDARD 9: R-300 DATA VALIDITY AND RELIABILITY

> Information collected on clients by the R-300 and all data reporting systems used by RSA shall be valid, reliable, accurate, and complete.

The VR service delivery systems needs an objective data base from which to measure performance. Yet inconsistencies and errors in reporting currently exist among and within VR program data systems. Confusion or misunderstanding over definitions exist and need to be minimized. This Procedural Standard would ensure that state agencies maintain acceptable levels of validity and reliability in reporting of R-300 and other data. This standard assumes states' attention to good data processing is pertinent to all the standards. Thus, given the importance of reliable, valid, and accurate data on which to base the program's evaluation capacity, we feel that this Procedural Standard relates to all of the broad RSA goals: compliance, quality, and cost-effectiveness.

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[1] RSA Identical Memorandum, October 17, 1980.

Reliability, accuracy and completeness of data should be checked in several ways. While we would recommend validity studies on a periodic basis, and edit checks as a part of routine data processing, this standard encompasses a specific recommended procedure for states to follow to ensure the accuracy of data recorded and submitted to RSA through the R-300. Primarily, the case review process should include an accuracy check between the case folder information, the R-300 form itself and, if the state has a computer system, computer output listing of R-300 items selected for review. In particular, those R-300 data items which are used in computing the standard's data elements should be subjected to checks of accuracy and validity through case folder documentation.

Further checks on the accuracy of the data recorded can be made by verifying the information recorded in the case folder with the client, or through other souces (such as employers, public assistance agencies, etc.), in order to determine whether the data recorded are, in fact, true. While we feel this is important to the accuracy of the data, it would be expensive and time-consuming to conduct such a verification procedure through routine follow-up or personal contact. Our recommendation in this area is to include such a check in a demonstration project to see whether a "reality check" would in fact significantly increase the accuracy of the R-300 data. If it does not, states should not be expected to continue the verification process on a routine basis, but expect that such information verification will be done periodically as part of RSA's central data validation procedure.

STANDARD 10: ELIGIBILITY DETERMINATION

Eligibility decisions shall be based on accurate and sufficient diagnostic information, and VR shall continually review and evaluate eligibility decisions to ensure that decisions are being made in accordance with laws and regulations.

The determination of an applicant's qualifications for eligibility is a critical point in the VR process for both the client and the agency. This standard seeks to protect client interest by requiring state agencies to install procedures for monitoring eligibility decisions in a sample of cases and ensuring that the decisions are appropriate, in compliance with legal requirements, and supported by the proper diagnostic information. This standard pertains to two of RSA's broad goals. First, inasmuch as the eligibility determination process rests on a legal footing, the standard pertains to the goal of compliance with the legislation. Second, we feel that it pertains to the goal of cost-effectiveness, since it is a misuse of money to serve ineligible persons, particularly if other, eligible clients are turned away due to an incorrect determination of ineligibility.

In establishing a procedural standard for the review of eligibility determination we are concerned with the appropriateness of the decision and its accordance with laws and regulations. We expect information from this review to address two facets of this concern: (1) that clients who are not eligible for VR services not be accepted for services, and (2) that clients who are eligible are indeed accepted.

While monitoring and review of eligibility decisions by supervising counselors or managers will provide a check on that determination, states have varying supervisory structures and roles and should be allowed to retain flexibility in their monitoring practices. Although we support a cross-check on eligibility decisions, we are not recommending its inclusion as a requirement for this standard.

Our primary recommendation is for the use of the case review system to monitor that decisions are made in compliance with the standard. We have recommended using the CRS as the review instrument, including the appropriate items addressing legal requirements for eligibility determination. Those relevant items from the CRS do in fact quite adequately cover the process concerns reflected in this standard.

STANDARD 11: TIMELINESS

VR shall ensure that eligibility decisions and client movement through the VR process occur in a timely manner appropriate to the needs and capabilities of the clients.

This standard seeks to avoid delays in the VR process that are likely to impede or hinder successful rehabilitation of the client. Rather than set a performance standard using time-in-status to define "undue delay," this Procedural Standard requires that each state have a monitoring or flagging mechanism for cases remaining in statuses over a given length of time, and a procedure to evaluate the appropriateness of any case delay. Many of the state VR agencies already have variations of such a system in place.

We include this standard among those pertaining to the RSA goal of providing quality case services, for two reasons. First, one aspect of the quality of a client's service experience is the speed with which his or her case is handled: did the client feel that the counselor "cared" about him/her (as evidenced by the fact that the counselor "kept on top of things" and "kept things moving along"), or did the counselor seem to put him/her on a lower priority? The client's perception of his/her treatment by VR can have an impact on his/her attitude toward VR and about the usefulness of participation in VR. Second, research on successful rehabilitation outcomes has suggested a relationship between timeliness and success (perhaps as a consequence of the perceptions discussed above).

The issue of timely case movement or "undue delays," as it is phrased in the current standards, has been one of long discussion and controversy. While there is literature to support the correspondence between certain times in process (particularly time to eligibility decision) and outcome, there have also been questions about inter-rater reliability in the area of judging timeliness of case movement through case review. Nevertheless, an overall review of timely case movement on a client-by-client basis is best handled through case review, if items can be identified which have good inter-rater reliability.

Much effort has gone into attempts to define, and establish standards for, timeliness of case service progress. As noted, research on successful rehabilitation outcomes has supported the concern for timeliness in establishing a relationship between the time required for an eligbility decision and ultimate client outcome. Previous attempts to monitor the timeliness of service provision by way of a standard on "undue delay" have been hampered, however, by several problems. The first is the definitional and reliability problem. "Undue delay" and its converse, "expeditious" or "quick and efficient" case management, mean different things to different people. The current standards use the approach of arbitrary time periods to define "timely" case movement: eight months has been defined as the limit for timely eligibility decisions; 22 months for timely completion of the VR process. This approach has been widely and justifiably criticized for its lack of sensitivity to the legitimate differences in individual cases: a complex case, perhaps involving long-term educational services, might well require more than 22 months, without any delay. Where a case has been subject to a delay, the situation is further complicated by the differing implications of different causes for delay: lack of client responsiveness, inattention or inefficiency on the part of the counselor or the VR agency, and problems outside of VR (failure of a vendor to deliver, unavoidable waiting lists in training programs). Each imply very different responsibility for time lapses and cannot equally be ascribed to VR agency "failure."

Thus, use of "objective" measures of timeliness has suffered from arbitrariness and frequent inappropriateness of established time cut-offs for many clients. Other approaches to objective measurement, such as recording planned initiation and completion dates for each service, and monitoring compliance with the schedule, suffer from cumbersomeness in execution. On the other hand, subjective judgments of timeliness have been vulnerable to criticisms of unreliability in application. BPA believes, however, that this unreliability may well have arisen due to the incorporation of two distinct concepts into the previously used "undue delay" judgments. This term, "undue delay," includes concepts of both time lapse and judgment of blame, culpability or unjustifiable time lapse. (The word "delay" itself sometimes connotes willfulness or negligence, and the modifier "undue" definitely implies such problems.) Case reviewers might well differ in judgments as to the cause of a delay, and thus whether VR should be held accountable; and for this reasons, reviewers may differ in their classification of a case, one citing an undue delay, another seeing an unfortunate time lapse, but being unwilling to label it an undue delay if client motivation or outside vendors played a role.

In response to the problem of a dual focus in assessing timeliness, we have proposed and performed preliminary testing of an approach which relies upon reviewer judgment, but which divides case assessments of timeliness into two segments: first, a notation of whether delay has occurred in terms of time lapse between necessary activities in a case; and, second, an assessment of the reasons for the lapses.[1] The relevant questions are appended to the Case Review Schedule, and concern critical phases of case progress -- eligibility determination; development of service plan; and service delivery and termination.

This review should take place for a sample of closed cases in each state. We have also proposed that a case flagging mechanism be required to address cases still in the open caseload to monitor their movement through the process as it occurs. This Procedural Standard would be in the form of a mechanism to be set up by each state to flag each case which has remained in a given status longer than a specified period of time.

Obviously, an effective, model flagging system needs to be developed for use by all states in response to Standard 11. Such a system might provide a signal to counselors in the form of a monthly client list with times-in-status when clients had been in a given status more than a standard period of time. Review of the client's situation should then take place (in a format decided by the state) to determine if case movement is appropriate, but no reporting to RSA would be required. Ideally, the amount of time-in-status beyond which flagging occurs would be set at appropriate, even if different, times for each status, However, even before the flagging system is developed, research is needed into the time levels which are appropriate for consideration as general limits for time in particular statuses. As part of our pretest of the standards, BPA undertook a first cut at this analysis, using data from the timeliness assessments and from the R-300. A summary of our system development appears later, in the discussion of the Timeliness Assessment instrument.[1]

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[1] Paul Cooper and Reed Greenwood, Region VI Final Report, "Assessing Undue Delays in the Vocational Rehabilitation Process," in Studies in the Evaluation of the State Vocational Rehabilitation Agency Process ("The New Orleans Report"), Sanford E. Rubin (ed.). University of Arkansas, Arkansas Rehabilitation Services, November 1975.

STANDARD 12: IWRP

VR shall provide an Individualized Written Rehabilitation Program for each applicable client, and VR and the client shall be accountable to each other for complying with this agreement.

There are several aspects of the Individualized Written Rehabilitation Program that would be addressed in this Procedural Standard: (a) compliance with the requirement that an IWRP be fully developed for clients accepted for services or extended evaluation; (b) assurance of the protection of client rights and client awareness of the remedies available for mitigating dissatisfaction; (c) joint client/counselor development of the job goal and the service plan; (d) mutual client/counselor responsibility for follow-through on the agreement and annual review of its progress and appropriateness; and (e) the appropriate handling of plan revisions.

This standard bears a relation to the RSA goals of compliance and quality case services. Obviously, given the regulations mandating provision of an IWRP to all accepted clients, this standard's relation to the compliance goal is clear. While the regulations concerning the IWRP stipulate compliance with the provisions of the law, elevating the issue to the level of a procedural standard will ensure compliance with the legislative intent of the IWRP.

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[1] The full analysis leading to our proposed model can be found in BPA's report, Review of State VR Agency Procedures for Case Flagging and Quality Assurance (September, 1981), available from RSA.

Inclusion of this standard could be justified simply on the basis of the strong regulation regarding compliance with the IWRP provisions of the 1973 Rehabilitation Act. However, perhaps an even more important reason to include this standard is the fact that research has shown a positive association between compliance with the IWRP requirements and successful outcomes of the VR process.[1] Since research has supported the premises underpinning the IWRP by showing that the process and the possession of the IWRP affect client outcomes positively, adherence to the IWRP requirements becomes a powerful norm for quality case management in VR, as well as a protection of client interests and rights.

With the IWRP, as with the standard on eligibility, we are recommending using the CRS to check for compliance with legal requirements for the plan. The Case Review Schedule includes a thorough set of items addressing this issue, and we have used it in our pretest. Unfortunately, while anticipation of a case review of closed cases should provide incentive to service delivery personnel for complying with these requirements, inadequate planning discovered after the case is closed will not benefit the client. If the case review system results in a given caseload being reviewed only once every two or three years, many open cases may be closed before the review can take place. Therefore, states may find it useful to institute an in-process compliance check on at least a sample of open cases, while there is still time in the process to improve any deficient plan. This goal can be accomplished by the inclusion of open cases in the uniform case review process.

DATA COLLECTION PROCESS FOR THE PROCEDURAL STANDARDS

Three major pretest activities were required to respond to the four proposed Procedural Standards. The three pretest activities, which in operation were combined in a variety of ways, included:

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[1] Berkeley Planning Associates, Implementing the VR Act of 1973: The VR Program Response, p. 59. (1978)

- Case Review Schedule designed originally by San Diego State University RCEP IX to assess states' compliance with the Federal Regulations and modified by BPA (in form and in analysis, although not in item content) to collect information on client's eligibility determination and IWRP processes, in order to respond to Standards 10 and 12.
- R-300 Verification procedure designed to assess the degree to which information submitted to RSA on critical items of the R-300 (defined as items used in the calculation of Performance Standards' data elements) was corroborated by casefile information, in order to respond to Standard 9.
- Timeliness Assessments designed to link subjective assessments of the timeliness of case movement to objective data on the length of time spent in various statuses by different disability types, thereby generating a data pool from which accountable parameters for times-in-status could be drawn, in order to respond to Standard 11.

Again, it should be noted that when fully implemented, these three instruments would be integrated into one instrument for use in collecting data on the Procedural Standards.

Data Collection

Two observations should be made regarding the overall process for data collection:

- Three different approaches to collecting the limited CRS data required to respond to the standards were employed: (1) selective analysis of the requisite subset of data items collected on the San Diego instrument (conducted in all six MEU's); (2) utilization of a modified CRS instrument on a small sample of cases in two MEU's (Oregon and Pennsylvania); and (3) pretesting of an integrated instrument on six reliability cases in Mississippi in which data items for all the Procedural Standards, as well as case quality indicators, were included.

- Also, Mississippi's experience as the initial pretest of the R-300 Verification procedure revealed serious deficiencies in the answer scale definitions and training instructions. The resulting responses were highly unreliable, as manually analyzed on-site. As a consequence, the activity was terminated, the instrument and training revised, and a return training visit to Mississippi, after the other MEU's had completed their data collection, resulted in completion of the data collection effort.

The sample dimensions achieved for each pretest activity are presented in Table 38, which also illustrates the previously mentioned variety of combinations of the three activities in implementation. It is important to remember that the samples of cases selected for the San Diego CRS in each MEU were used throughout the Procedural Standards for the other pre-test activities. Ideally this sample would have been extended into those activities in the Performance Standards requiring sampling (i.e., R-300 Supplement C&D, Closure and Follow-up Surveys), in order to optimize supportive evaluation opportunities on the same cases. However, the duration of the pretest and the independent logistical planning of SDSU and BPA early in the pretest permitted common samples on only 60 26-closures and 60 28-closures from Pennsylvania. Most unfortunately, the samples contain no 08 closures. This precludes any analysis of compliance with regulations designed to protect the rights of clients closed as ineligibile.

Time Requirements

The labor investments to complete the Procedural Standards are presented in Table 39. The average level of effort, including Program Evaluation and support staff, was 157 person days, or nearly two-thirds of a person year, to administer, prepare, train, execute and analyze the Procedural Standards pretest activities. By far the greatest proportion of time was consumed by the San Diego CRS which, on average, accounts for 80% of the effort. The wide range for these activities -- from 117 person days to 216 person days -- can be explained in part by which activities were combined in training and execution, as well as by the number of

Table 38

Procedural Standards Sample Dimensions

	DEL	MICH	MISS	OREG	PENN	VIRG
Full SDSU CRS	120	120	120	100	110	120
Status 26	60	60	90	50	55	60
Status 28	60	60	30	50	55	60
Modified CRS	--	--	--	20	20	--
Status 26	--	--	--	5	5	--
Status 28	--	--	--	5	5	--
Status 30	--	--	--	5	5	--
Status 08	--	--	--	5	5	--
CRS Plus Timeliness	--	--	--	120	130	--
R-300 Verification Alone	--	120	--	120	120	--
R-300 Verification Plus Timeliness Assessment	50	--	120	--	--	120
Timeliness Assessment Alone	--	120	--	--	--	--
Procedural Standards Case Review Instrument	--	--	6	--	--	--

Table 39

Procedural Standards

Pretest Level of Effort

(in person days)

	DEL	MICH	MISS	OREG	PENN	VIRG	AVG
General Administration	28.0	5.0	.5	1.2	27.8	2.3	10.8
R-300 Verification & Timeliness Assessment	8.0	25.0[a]	18.0[b]	10.0[c]	25.0[c]	18.0	17.3
Training	2.0	6.0	4.0	2.0	10.0	4.0	4.6
Execution	6.0	19.0	14.0	8.0	15.0	14.0	12.7
San Diego Case Review Schedule	179.0[d]	103.0	99.0	105.0[c]	139.0[c]	130.0	125.8
Preparation	40.0	15.0	10.0	17.0	20.0	25.0	21.2
Training	68.0	44.0	42.0	36.0	70.0	44.0	50.7
Execution	50.5	33.0	36.0	36.0	36.0	48.0	39.8
Analysis	20.5	11.0	11.0	16.0	13.0	13.0	14.0
Miscellaneous (Case Flagging & Case Quality)	1.0	0.0	0.0	1.0	5.5	2.5	1.7
TOTAL	216.0	133.0	117.5	117.2	197.3	152.8	155.6

[a] Two separate groups reviewed the R-300 and timeliness aspects of the procedural standards in Michigan. Four PE unit staff completed the timeliness assessments; ten district office managers completed the R-300 verifications.

[b] These are the values for the second data collection effort in Mississippi. The initial effort resulted in substantial revisions in the data collection instruments and instructions.

[c] In Oregon and Pennsylvania, the R-300 Verification procedure was conducted separately; the Timeliness Assessments were included in the SDSU Case Review procedure.

[d] Delaware completed the CRS prior to the initiation of the pretest and subsequently elected to continue the process as an on-going evaluation activity. The labor estimates include both the initial CRS training and data collection effort, as well as two follow-up training activites.

reviewers in each MEU. In addition, Delaware conducted two advanced trainings of all the state's counselors following dissemination of the results of the initial Case Review activities, thereby substantially increasing the level of effort estimates in that category.

The Case Review Schedule is of particular interest when considering the issue of time requirements, inasmuch as this is the longest, most detailed, and most demanding of the three Procedural Standards data collection instruments. The data collection methodology stipulated that 120 cases, reflecting aspects of interest to the state (e.g., various closure statuses, district or regional differences, urban versus rural areas), be selected for each MEU. The level of effort required to complete the CRS on these 120 cases is primarily a function of the number of reviewers involved times a maximum of five days for training and reviewing. Other variables which can affect the total labor investment, presented in Table 39, are: in-state organization of casefiles, appropriateness of selected reviewers, effectiveness of trainers in consensus building, and number of attendees at the follow-up training and presentation of results. Only Delaware's investment of 179 person days far surpasses the average of 126 person days for this activity. This is the result of two additional advanced trainings subsequent to the initial CRS training and data collection effort. Overall, the Case Review absorbed the greatest amount of effort. On average, it accounted for 44% of the total labor expended in pretesting the proposed Program Standards (i.e., both the Performance and Procedural Standards).

In contrast, and as can be sensed by the data in the table, pretesting of the R-300 Verification and the Timeliness Assessment instruments required far less time. On average, 17 person days were required to complete these pretest activities on the 120 case sample. However, these figures must be seen in the context of their role vis-a-vis the total Procedural Standards data collection process. That is, although these instruments request information of a different kind than does the CRS, in the ideal situation they would be completed in conjunction with the CRS. This is because the three instruments complement each other, both in terms of the information they elicit, and in terms of the overall understanding provided to reviewers when the instruments are used in conjunction. The point is this: it is somewhat irrelevant that the CRS requires so much more effort to complete, relative to the Timeliness and R-300 Verification instruments; the three should be seen as a package.

Further, while the CRS did require an exceptionally greater amount of time relative to other instruments, we feel that time requirements for the CRS (as well as all the other instruments) will show a great reduction when the full system is implemented, because:

- reviewers will become more efficient with experience, and
- problems pointed out in earlier reviews will be corrected through training and feedback, thus improving case documentation and facilitating the process of case review, and ultimately reducing effort required.

ANALYSIS AND INTERPRETATION OF PRETEST DATA

We present the results of the pretest data in the next section of this report. Prior to this presentation, however, we wish to make the reader aware of the special issues surrounding the pretest data, and the use of that data. To start, we must always keep in mind that this is a pretest effort; it is not an actual assessment of agency performance. As such, while we do discuss our findings with regard to agency performance, we focus on general performance trends which can be observed across states, rather than focusing on individual states' performances. (By "across states," we generally mean at least two states showed problematic performance). Further, we attempt to suggest the causes of and possible solutions to any problems observed; again, in terms of all states rather than individual states. When implemented, the standards data will be used to identify problems in and target training and assistance to individual states.

The second point is that, given the pretest nature of this activity, we are concerned with the quality of the data itself: to what degree can we "trust" what the data tells us about agency performance? As part of the pretest we wish to know those items which proved problematic -- from an interpretation standpoint -- due to inability of reviewers to arrive at a consistent understanding of "success": that is, to arrive at common understanding of what does and does not constitute adequate documentation, compliance, validity, timeliness, and so on. Once we know the problematic items, one of two things should happen:

- the item should be deleted from the data collection instrument; or
- reviewers should receive enhanced training (informed by use and discussion of the instrument) to overcome the consistency problem.

Our preference is that the latter process occur. We feel that, as designed, the data items included in the Procedural Standards represent the minimum needed to assess compliance, data validity, and timeliness.

The San Diego RCEP has developed a technique for assessing inter-reviewer reliability. Their technique, which results in a "consistency ratio" for each item, appears in Exhibit 7. We include the consistency ratios resulting from the pretest data in the various data tables in Section VIII of this report.

Finally, the RCEP has established certain criteria for interpreting the results of the data. These criteria pertain to

- the minimum number of cases needed before data can be analyzed;
- the interpretation itself (i.e., given a certain level of performance, should the agency move to correct the problem immediately, should they simply "consider action," or what); and
- the necessary level of consistency among reviewers needed to allow data interpretation.

The specific criteria for the first two issues are presented in Exhibits 8 and 9. As regards the third issue, a .75 consistency ratio has been established as the minimum level necessary for unquestionable data interpretation for each of the sections of the BPA/MCR. While a minimum level of .75 is statistically sound, it is an arbitrary figure and can be raised or lowered by the discretion of RSA. We feel that .75 is appropriate. We take issue, however, with the RCEP's criteria for recommending corrective action. As Exhibit 9 shows, a level of 75% compliance is deemed acceptable. We would raise this to 85% - 90%, since the purpose of the Procedural Standards is (among other things) to promote maximum compliance with regulations, data validity, and timely case service.

With these general points in mind, we next turn to a discussion of the comments and data collected during the pretest.

Exhibit 7

PROCESS OF DETERMINING THE INTERRATER RELIABILITY (consistency) *RATIO*[1]

EXAMPLE OF

CRS, IIA, ITEM #1 *(BOOKLET CODE NUMBERS ARE FICTITIOUS)*

```
*********************************

* # *BOOKLET*  REVIEWER  NUMBER *
*   * CODE  *  1 2 3 4 5 6 7 8 9*
*********************************
* 1 *029-237*  1 1 1 1 1 1 1 1 1*
* 2 *061-069*  1 1 1 1 2 1 1 1 1*
* 3 *075-083*  1 1 1 1 2 2 1 1 2*
* 4 *101-109*  1 1 1 1 1 1 1 1 1*
* 5 *136-144*  1 1 2 1 1 1 1 1 2*
* 6 *159-167*  1 1 1 1 2 1 1 1 1*
*********************************
```

(There must be a minimum of 8 reviewers and a maximum of 12. The example shown here indicates 9 reviewers)

Responses: 1=Yes; 2=No; 3=Not Applicable

Reading across the top of Case 1, the #1 response is the highest occurring response or mode. In this case there are 8 responses of #1. In the following cases the mode is:

Case 2: #1 is the mode with 8 responses

Case 3: #1 is the mode with 6 responses

Case 4: #1 is the mode with 7 responses

Case 5: #1 is the mode with 7 responses

Case 6: #1 is the mode with 8 responses

A consistency ratio was derived by combining the total number of responses for each mode in each case and then dividing by the total number of actual responses.

$$\frac{\text{Numerator} = 8 + 8 + 6 + 9 + 7 + 8 = 46 \text{ (Number of reviewers in agreement)}}{\text{Denominator } 9 \times 6 \text{ (Number of responses = number of reviewers X number of cases)}}$$

OR

$$\frac{46}{9 \times 6} = \frac{46}{54} = .85$$

A .75 consistency ratio has been established as the minimum level necessary for unquestionable data interpretation for each section of the CRS.

---

[1] From SDSUO RCEP report produced in the Volume I Pretest Report, page 295.

Exhibit 8

Criteria for Reporting Data Results on Each Question[1]

Percent of Cases with active responses on each Item. 1/	Status 26 (N=49) 2/	Status 28 (N=49) 2/	Outcome	Discussion
51% and Above	N=49-25 cases	N=49-25 cases	Reported without special consideration.	Both open & closed statu has 51% or more active responses on a question.
21 - 50%	N=25-11 cases	N=25-11 cases	Data reported with special consideration.	Either the open or closed status was between 21% & 50% of the active responses
20% - Below	N=Less than 11 cases	N=Less than 11 cases	Data not reported in this analysis.	Either the open or closed status was below the 20% minimum. The results were not reported.

1/Active responses refers to the total percentage of responses, excluding N/A responses on each Item.

2/The number of cases reflects the total cases in either Status 26 or 28. These are referred to as unduplicated cases.

---

[1] From Preliminary Pretest Report, page 296.

Exhibit 9

Standards for Interpretation of Percentage of Responses[1]

Percentage of Active Responses per Item	Response Format		
	"Yes" or "Adequate"	"No" or "Less Than Adequate"	Discussion
0 - 25%	No Comment	No Comment	There is no identifiab basis for comment.
26 - 50%	No Comment	Area of Concern: Examine	Provide closer examination of results and consider action.
51 - 75%	No Comment	Attention: Consider Action	Explore recommendation and develop a plan of remediation.
76 - 100%	Action: Positive Commendation	Action: Provide immediate attention	This area requires imm diate action in the "N "Less than Adequate" responses.

---

[1] From Preliminary Pretest Report, page 296.

VIII. ANALYSIS OF THE PROCEDURAL STANDARDS DATA

This section presents the data obtained through the implementation of the Procedural Standards pretest in the six MEU's. The analysis of the data will appear in three groups, according to the data collection methodology employed for each standard. The three groups are:

- Case Review Schedule, which is the method of collecting data for Procedural Standards 10 and 12;
- R-300 Verification, for Standard 9;
- Timeliness Assessment, for Standard 11.

For each of these three groups, the format of the discussion is as follows:

- The rationale for the standard will be presented.
- Presentation of the training and logistics needed to implement the pretest will then follow.
- A synthesis of the comments received from the MEU's, program evaluators, and reviewers will then be presented. These comments will be grouped according to major topics, such as "cost and effort" and "possible benefits." These comments were obtained mostly during training, through written evaluation forms.[1]
- Following the comments, we will respond to critical issues raised in that section.
- Lastly, presentation and analysis of the data.

Based on the information found in this section, Chapter X of this report will present our recommendations for revisions in the Procedural Standards.

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[1] Verbatim comments are presented in the Preliminary Pretest Report (November, 1980).

CASE REVIEW SCHEDULE

The Case Review Schedule (CRS) designed by San Diego State University RCEP IX responds to Standards 10 and 12, by assessing the states' compliance with federal regulations and by collecting information on clients' eligibility determinations and IWRP processes. In addition, BPA developed a Modified CRS which deleted many items not necessary for assessing states' performance on the Procedural Standards.

The CRS, in both its official version and even in its modified version, is too extensive to reproduce in this section. It has been included in Appendix 2. In responding to Procedural Standards 10 and 12, only those data items (i.e., regulations) pertaining to the eligibility determination and IWRP processes were analyzed.

Training and Logistics

Each state participated fully in San Diego's Case Review Schedule procedure. The steps in this procedure were as follows:

- Pre-training Logistics
  - -- Negotiate dates with each state
  - -- Negotiate sample dimensions with each state
  - -- Sample selection (120 cases)
  - -- Case files sent to central location for review
  - -- Completion of Section I (identifying information)
  - -- Review team selection (8-16 reviewers):
    - * 2-3 counselors
    - * 2-3 supervisors
    - * 1-3 program evaluation specialists
    - * 1-3 rehabilitation administrators
    - * 2-3 regional office observers
- On-site Training (2 days)
  - -- Five to six hours of training focused on orientation to CRS sections and corresponding instructions in CRS manual
  - -- Individual application of CRS to representative training case

- -- Small group discussions to process results of training case on an item-by-item basis.
- -- Discrepancy resolution in large group discussion
- -- Repeat of individualized case review, small group process, and large group process on second training case to further develop consistency

- Case Review (3 days)
  - -- Standardized method of distribution of cases
  - -- Integrated distribution of six reliability cases to all reviewers to enable a determination of inter-rater consistency
  - -- Case flow monitored throughout actual case review

Several states (Delaware, Michigan, Mississippi and Virginia) were trained by SDSU prior to BPA's authorization to coordinate with SDSU on this activity. The two remaining states' CRS trainings were scheduled for the same week in February, permitting BPA attendance at only one (Oregon).

Issues Raised During the Pretest

The six MEU's were asked to comment on the Case Review Schedule; on the general feasibility of incorporating the CRS process into the Program Standards; and on specific problems they encountered and/or anticipate for their state, should the CRS be implemented to collect Procedural Standards data. We have grouped these comments into broad issue areas. Below, we discuss the major issues addressed in the comments and present our response and recommendations.

Cost, Effort, and General Benefits Derived From the CRS

Reviewers raised the issues of cost and effort in relation to all three Procedural Standards data collection instruments. However, the Case Review Schedule generated the greatest number of negative comments among the three instruments. The specific issues raised include:

- the instrument's length;
- the staff time-resources required to conduct the case review, particularly if it were conducted annually (one state remarked that the CRS "requires maintaining another audit team"); and
- the potential "over-kill" of the instrument: as one reviewer said, "It (the CRS) may be more detailed, time-consuming, and critical than what is needed to evaluate compliance." (Emphasis added.)

Despite these comments (especially the last), the CRS received quite favorable comments regarding the potential benefits resulting from its use. The instrument was described by various reviewers as:

- "very comprehensive with respect to determining compliance,"
- "a thorough and uniform method of case review," and
- "a long step towards the development of a standarized instrument to be utilized nationally which is badly needed." (Emphasis added.)

Overall, then, the general feeling towards the CRS was that: (1) it is a good (and needed) instrument for determining compliance with Federal laws, but (2) it requires too much effort.

Unfortunately, no provision was made during the pretest data collection phase to test BPA's Modified CRS. This might have pointed to a possible solution to the cost-versus-benefit quandry, since the MCRS uses a fairly small subset of the full CRS questions. The data collectors should have used the MCRS on a greater scale (only 40 out of a total 730 reviews used the MCRS), and they should have compared the effort required for the MCRS to that required for the full CRS. (While this analysis may have been done, the results were not forwarded to us, nor did we even find evidence that separate records were maintained.)

We might, in fact, have found no difference between the two instruments. In choosing the CRS items needed for the Procedural Standards (and embodied in the MCRS), BPA strove to include those items deemed necessary to capture the "essence" of eligibility and IWRP related issues. It may be that in order to "capture the essence" (a la the MCRS), one needs to know the details (a la the full CRS). If so, the only functional difference between the MCRS and the CRS would be the additional effort required to actually record the details on the form; this may add only minimally to the total effort. On the other hand, we might have found significant differences in required effort. Unfortunately, we simply have no basis to make a judgement.

Specific Benefits Derived From the CRS

As discussed above, the CRS was generally viewed as capturing the relevant compliance concerns. In addition to this general benefit, several other points were made regarding a variety of other, specific benefits potentially resulting from use of the CRS. Below we paraphrase these comments.

- The CRS helps provide a *better understanding* of eligibility and IWRP regulations, both in terms of the *content* and the *intent* of regulations. It could be a *good teaching mechanism for state* agencies.
- Provided that analysis results feedback to field personnel, the CRS might result in *better organized case folders* containing more complete documentation.
- For management personnel, use of the CRS could *alert the agency* to particular casework problems, and *identify areas where staff training is needed.*
- The results could help to *revise and make new policy.*
- The CRS provides a *uniform, cross-state evaluation* of compliance. (Although, as discussed below, certain advance procedures must occur to ensure uniformity.)
- The CRS format *lends itself to "segmental auditing"*: that is, to separate reviews of casework procedures during application, extended evaluation, etc.

Comparisons With Existing State Case Review Methods

Four of the six MEU's reported that, in general, the CRS produced the same results -- that is, pointed out the same strengths and weaknesses -- as were produced by the MEU's own case review mechanisms. Not surprisingly, these states generally perceived no particular advantage to using the CRS other than (as stated by one state respondent) "as a training tool for federal regulations."

Substantive Thrust of the CRS

Reviewers in almost every MEU commented on what they perceived to be the misdirected focus of the CRS. Specifically, these reviewers felt that the CRS focuses too much on "paperwork" (i.e., the quality of counselor documentation) to the detrimental exclusion of a concern for quality case handling. (One reviewer even remarked that the CRS ignored "many areas of casework that should be covered.") The implication of these comments was that if the CRS is implemented, its orientation towards paperwork would "rub off" on counselors, leading them to stress documentation over quality case handling. In our opinion, these concerns are unfounded. It is true that, in general, the CRS items focus on case record documentation. However, in a sense, this is the way it must be. First, we are dealing here with a case review process; that is, with a (generally) after-the-fact assessment of case handling. If such an assessment is to be possible, reviewers must be able to find documentation in the case record which establishes that counselors followed proper procedure.

Second, the documentation sought by the CRS pertains to federal mandates concerning proper client selection (i.e., eligibility), safeguards against improper determinations of ineligibility, assurance of clients' rights to due process, and assurance of client opportunities to participate in planning their service process and objectives. We would argue that the CRS items are important not only because they address issues of compliance with federal law, but also because they manifest -- albeit indirectly -- a concern for quality casework and effective agency operation. For example, the ineligibility issue relates to coverage (i.e., maximizing service to the relevant population) and cost-effectiveness (i.e., not wasting resources on ineligibles). As pertains to individual clients, the IWRP-related items are even more directly concerned with quality case handling; it is generally accepted that greater client success results when the client feels he/she has played a role in shaping his or her service goals. In short, we feel the CRS items do relate to quality casework (though they do not capture all aspects of case quality), while at the same time capturing important compliance concerns.

Finally, we are not worried about counselors shifting their focus from casework to documentation. Counselors will always first and foremost be concerned with the service process. However, they must understand that the environment in which they function -- particularly since passage of the 1973 Act -- requires them to provide certain amounts and types of documentation. If they cannot (i.e., do not know how to) provide documentation, they should receive the needed training. (Basically, this would consist of teaching them how to describe their actions and decisions clearly, and of impressing on them the importance of including backup documents.) If they will not provide the documentation, corrective action should result. Likewise, if documentation doesn't exist because of failure to follow proper procedure, corrective action is called for. In short, we feel that documentation is merely the last step in quality case service; it follows as a natural result. Documentation does not become an end to itself.

Instrument and Question Format

Several comments were made regarding the instrument format and question wordings. We already mentioned reviewers' perceptions that the CRS is too long. In addition, various reviewers remarked that the instrument format was "cumbersome and unwieldy, requiring huge amounts of space," and that "the coding cards were a great nuisance." (The current form of the CRS uses "mark-sense" cards; the kind where #2 pencils are used and the answer sheet is read directly into the computer.) Based on our own experience, we would recommend a return to the original format, where forms were keypunched and the cards read into the computer. We say this for two reasons. First, the hardware needed to use mark-sense cards does not seem, as yet, to be sufficiently accessible, versatile, or even understood, compared to more traditional data-entry systems. This generates problems particularly if one wants to do more with the data than simply report aggregate statistics. (It might be desirable, for example, to link CRS data to clients' R-300 records. We have been unable, in an admittedly somewhat limited search, to find anyone capable of doing this or other operations directly from mark-sense cards.) Until the needed technology becomes more accessible, we feel the old method is better, despite the added step (i.e., keypunching) which it requires.

A second reason for switching formats is that, in our opinion, the current process of coding information is more complex, and invites more coding error than the old process. It is harder for a reviewer to lose his place when he records answers once, directly on the form, than when he has to transfer the information to the mark-sense card.

Turning to the issue of the specific questions and their formats, the following comments were made:

- "Better semantics (needed) -- frequently found terminology confusing."
- "Phraseology confusing, wordy and unclear."
- "Too many questions; many are repetitive."
- "Clarification needed to assure consistency among (reviewers)."
- "Decisions are often based on opinion of reviewer; opinions vary on interpretation."
- "Forced answer choices often difficult to employ on inapplicable."

In response to the first three comments, we feel that the problems are overstated. The CRS questions actually follow a fairly easy-to-understand format; problems along this line should decrease as familiarity with the instrument increases. Further, in our opinion the questions are not repetitive, although they do sometimes request increasingly detailed information on the same general topic.

The second three comments present more of a problem. Some questions are subjective; that is, they require interpretation and judgment. Other questions may require arbitrary judgments. However, we feel that these problems can also be mitigated by adequate training, particularly with respect to: 1) policy requirements; 2) acceptable/appropriate documentation; and 3) current best practice. We deal with these issues further in our discussions of necessary reviewer qualifications and training needs, and in our recommendations for system implementation.

Conflicts With State Policy

One of the major issues raised by reviewers concerned their perception that the CRS incorrectly implies a uniformity of policy and procedure across all states. Their range of concerns are conveyed best by the reviewers' own comments:

- "Before anybody tries to collect information at the state level, they should first check to see if the policy and procedures at the federal and state level are the same, otherwise the data obtained could be unreliable or invalid."
- "Each state has own policies and how can states be compared with one another?"
- "Modifications needed to cover peculiarities of (blind agencies.)"
- "Questions need more clarification. States have many options for services and *questions don't fit all molds.*" (Emphasis added).
- "Too much inclusion of federal terms unnecessarily contained in CRS -- should be a separate document."

Presumably, the problem here pertains more to case recording practices than to specific casework policies. After all, the law is the law and states must comply with it. However, it would be unfair if, due to recording practices, a state *seemed* to be out of compliance when in fact it was not. Because the reviewers did not provide specific examples of problem areas, it is not possible to determine the importance of this issue or to suggest solutions. If the problem does lie in the realm of case recording, a possible solution would be for the state and RSA to establish the existence of the problem beforehand, and to account for it when interpreting data results.

Reviewer Qualifications and Training Requirements

From an implementation standpoint, some of the most significant comments pertained to reviewer qualifications and to training and process strategies. Because these issues are central to effective implementation of the *full* Procedural Standards process (i.e., R-300 Verifications and Timeliness

Assessments, as well as the Case Review Schedule), we discuss our responses and recommendations in Chapter XI of this report, on implementation design. Here, we simply present the comments, most of which we feel present valid points needing an appropriate response:

- In order to achieve most reliable results, individuals who were more familiar with actual casework procedures should have been utilized as reviewers.
- CRS requires continual training to get consistency.
- User apathy was a problem.
- Reviewer attention was a problem.
- Introduction does not explain the purpose of the activity.
- Slides helped considerably.
- Would be helpful if R-300 verification preceded CRS training.
- Might be nice if group could discuss some of mutually reviewed cases after the fact.
- Too long. Better: many more reviewers with fewer cases per reviewer.

One point we should note here is that many negative comments were made about the training process employed during the pretest. Some of the problems probably resulted from the multiple purposes of and actors in the pretest, and would be less severe in on-going operation of the system.

Presentation and Use of CRS Information

The final set of issues brought up by reviewers concerned the possibilities for using CRS data. Essentially, some reviewers were worried that the instrument would be used for administrative review only, with no potential for use by line supervisors and with no feedback given to counselors. It is true that the broad purpose of the CRS, in the context of the Procedural Standards, is to allow states and RSA go get an overall view of compliance with regulations. However, in our opinion there is no reason why CRS information could not be disaggregated by counselor, and training targeted on that basis. In fact, the reviewer comments noted earler under

"Specific benefits derived from the CRS" affirm this assertion. The potential for feedback is limited only by the state's willingness to provide it (except, perhaps, for those agencies lacking EDP capacity, for whom provision of special assistance may be required).

Finally, some reviewers stated a preference for presenting the results via percentages (i.e., in terms of numbers) rather than via histograms. We agree. Histograms are somewhat hard to read, from a precision standpoint; they require excessive space; and they require too much effort to produce, particularly if district-level or counselor-level data is desired. Of course, the exact method is the option of the reporting body; we simply prefer the numbers.

Summary

Overall, the Case Review Schedule is seen as a good instrument for its intended purposes, and one with a variety of quality-related benefits. However, it was also seen as requiring excessive effort. Some concerns were expressed regarding the instrument's focus and format; we feel these concerns are misdirected, and we feel that we have adequately explained our reasoning (see pp. 28-30). Overall, BPA feels that the CRS (or Modified CRS) would be appropriate for implementation as the data collection instrument for Standards 10 and 12. However, prior to implementation, certain broad questions must be answered. These are:

- Who will have responsibility for data collection?
- How often will data collection occur?
- How will conflicts between the CRS and states' policies be reconciled?
- What qualifications must reviewers have?
- What type of reviewer training is required?
- How can the review process be made most efficient and effective?

Because these issues concern all three Procedural Standards data collection instruments, we will address them later with other issues concerning system design. We turn next to the CRS results obtained during the pretest.

Results of Pretest Data

In this section we present the performance levels and consistency ratios obtained from the pretest samples. The analysis is based on already-processed data provided to BPA by the San Diego RCEP. The discussion is organized by successive sections of the CRS. We begin with the data relevant to Standard 10. As noted earlier, our MEU reviewers generally approved of both the intents of Standards 10 and 12, and of the particular CRS items used to assess performance on the Standards.

STANDARD 10: ELIGIBILITY

Section IIA: Evaluation of Rehabilitation Potential; Preliminary Diagnostic Study - Status 02

This section assesses the extent to which the case record documents the occurrence of the various activities needed to conduct an effective preliminary diagnostic study. This study, completed during the application phase, should contain all of the information necessary to make a reasonable assessment of a client's eligibility for VR services. Among these necessary pieces of information are all relevant medical and psychiatric examinations, and other evidence that supports the client's need and eligibility for rehabilitation services. Without this information, agencies will not be able to select the disabled individuals who can most benefit from available -- but limited -- VR services.

Compliance with the regulations addressed in Section IIA was generally very good. In most cases, the information was reported 90% to 100% of the time. (See Table 40). These figures can be considered reliable since the corresponding consistency ratios were generally over .900. The only problematic area was that of documenting the necessity for extended evaluation (Items 6b and 11 in Table 40); on these items, some performance levels fell below 50%. Considering that entry into extended evaluation causes a delay in the full provision of services, it is very important for both the agency and the client to know the basis for that decision.

Table 40

Section II: Evaluation of Rehabilitation Potential

A: Preliminary Diagnostic Study - Status 02

DOES THE PRELIMINARY DIAGNOSTIC STUDY...		DE	MI	MS	OR	PA	VA
4 - Include current health appraisal?	Performance (%)	100	95	99	93	96	99
	Consistency Ratio	.981	.955	1.000	.983	.983	.972
5 - Include psychiatric examinations if appropriate?	Performance (%)	100	82	63	86	100	98
	Consistency Ratio	.933	.742	.917	.875	.917	.875
6a - Include eligibility studies?	Performance (%)	98	91	99	89	98	97
	Consistency Ratio	1.000	.909	.972	.983	1.000	.931
6b - Include need for extended evaluation?	Performance (%)	100	44	100	100	100	67
	Consistency Ratio	NA	.886	NA	.917	NA	.917
7 - Place emphasis on achieving vocational goal?	Performance (%)	93	91	92	93	98	97
	Consistency Ratio	.981	.848	.958	.950	.983	.931
8 - Support determination of disability?	Performance (%)	98	97	100	93	100	99
	Consistency Ratio	1.000	.955	.986	.983	.967	.931

CRS QUESTION WORDINGS

The exact wording of the Case Review items for Section IIA, pertaining to Standard 10, appears below.

Does the preliminary diagnostic study...

4. include an appraisal of the current general health status of the client?
5. include a psychiatric or psychological examination in all cases of mental or emotional disorder?
6. include such examinations and diagnostic studies as necessary to:
    a. determine eligibility?
    b. determine the need for extended evaluation?
7. place primary emphasis upon the determination of the client's potential for achieving a vocational goal?
8. support the determination that the client has a medically-recognized physical or mental disability?

Table 40 (cont.)

DOES THE PRELIMINARY DIAGNOSTIC STUDY...		DE	MI	MS	OR	PA	VA
9 - Support disability as handicap to employment?	Performance (%)	97	98	97	87	97	97
	Consistency Ratio	.981	.909	.944	1.000	.933	.944
10 - Support that services will benefit client?	Performance (%)	90	92	95	87	98	94
	Consistency Ratio	.981	.924	.889	.983	.967	.903
11 - Support that Extended Evaluation is necessary?	Performance (%)	100	36	93	100	100	100
	Consistency Ratio	.889	.818	.889	NA	NA	.889
	N =	120	119	119	100	98	118

CRS QUESTION WORDINGS

The exact wording of the Case Review items for Section IIA, pertaining to Standard 10, appears below.

Does the preliminary diagnostic study...

9. support the determination that the medically-recognized disability constitutes a substantial handicap to employment for the client?
10. support the determination that VR services may reasonably be expected to benefit the client in terms of employability?
11. support the determination that an extended evaluation is necessary to determine that VR services may reasonably be expected to benefit the client in terms of employability?

Section IIB: Evaluation of Rehabilitation Potential; Extended Evaluation - Status 06

Section IIB seeks documentation that the state agency has followed proper procedure in placing applicants into extended evaluation, status 06. For the Procedural Standards, our concerns are that case records include:

- certification for extended evaluation to determine rehabilitation potential;
- the basis for the need for extended evaluation;
- evidence of the occurrence of thorough assessments of progress at least every 90 days; and,
- documentation of the eligibility decision resulting from extended evaluation.

Provision of this information helps ensure that extended evaluation is used only when appropriate, that the client moves through extended evaluation in a timely manner, and that the minimal recording needs for Status 06 are maintained.

Table 41 presents the results of Section IIB. Several data problems arose in this section. Virginia has not been included in this table, since that state apparently did not review any cases of clients placed into status 06. In other states, the low number of extended evaluation cases included in the reliability sample precluded computation of consistency ratios. Also, no data was available on 08 closures, thus results for items 42a and 42d, pertaining to ineligibile applicants, are not available.

In general, state compliance appeared fairly high in terms of:

- including a certification for extended evaluation in the case record (item 14);
- presenting the basis for the need for extended evaluation (item 19); and,
- documenting that a certification of eligibility for continued services was completed, when appropriate (item 40).

However, states apprently less often document the occurrence of 90-day reviews required under status 06 (item 33). It is important that the case record contains this information, or the agency will not be able to assess the quality and appropriateness of services given during extended evaluation.

Section III: Eligibility - Status 10

While it is important to document in the preliminary diagnostic study the extent to which applicants meet the basic eligibility criteria, it is even more important to ensure that all clients accepted for services meet all of the requirements for eligibility. The purpose of Section III is to document that a certification of eligibility was completed for each accepted client, and that counselor documentation in the case record confirms:

- the existence of a disability;
- the existence of a substantial handicap to employment; and
- the likelihood that VR services will benefit clients.

The results of the pretest (see Table 42) show that at least 98% of the certifications of eligibility indicate that clients met these three requirements (see item 1C). The next three items seek to document that counselor records corroborate the information contained in the certification of eligibility. State performance was generally good in terms of documenting the presence of a disability; this occurred in at least 79% of each state's cases (see item 3). However, the remaining two eligibility criteria proved more problematic. This can be seen by scanning down each individual state's column in Table 42, and comparing the results obtained on Item 3 to the results obtained on items 7 (concerning documentation of an employment handicap) and 8 (documenting "reasonable expectation"). Note that on items 7 and 8, each state registers lower performance levels and lower consistence ratios that it obtained on item 3. Stated operationally, these findings imply:

1. that states are less diligent in documenting the existence of employment handicaps and "reasonable expectations" than they are in documenting existence of a disability (as shown by the lower performance figures); and

Table 41

Section IIB: Evaluation of Rehabilitation Potential; Extended Evaluation Status 06

DOES THE CASE RECORD...		DE	MI	MS	OR	PA
14 - Contain certification for extended evaluation?	Performance (%)	73	0	100	100	0
	Consistency Ratio	.889	.909	NA	NA	.917
DOES THE IWRP...						
19 - Present basis for need for extended evaluation?	Performance (%)	100	--	88	100	--
	Consistency Ratio	NA	NA	NA	NA	NA
33 - Show that review of progress was made under extended evaluation?	Performance (%)	78	--	29	100	--
	Consistency Ratio	NA	NA	NA	NA	NA
DOES THE CASE RECORD...						
40 - Contain a certification of eligibility for continued services?	Performance (%)	100	--	88	100	--
	Consistency Ratio	NA	NA	NA	NA	NA
42a - Show decision to terminate was made with consultation?	Performance (%)	--	--	--	--	--
	Consistency Ratio	NA	NA	NA	NA	NA
42d - Show that provision was made for review?	Performance (%)	--	--	--	--	--
	Consistency Ratio	NA	NA	NA	NA	NA
	N =	120	119	119	100	98

CRS QUESTION WORDINGS

The exact wording of the Case Review items for Section IIB, pertaining to Standard 10, appears below.

Does the case record...

14. contain a certification for extended evaluation to determine rehabilitation potential?

Does the IWRP for extended evaluation (state form)...

19. present the general basis for a determination that an extended evaluation of rehabilitation potential is necessary to make a determination of eligibility?

33. show that a thorough assessment of the client's progress was made at least once in every 90-day period during the provision of services under the extended evaluation?

Does the case record...

40. contain a certification of eligibility for the continuance of VR services?

42a. show that the decision to terminate services was made in full consultation with the client, or as appropriate, with the parent, guardian, or other representative?

42d. show that the provision was made for a periodic review, at least annually, of the ineligibility decision?

Table 42

Section III: Eligibility - Status 10

DOES THE CERTIFICATION OF ELIGIBILITY...		DE	MI	MS	OR	PA	VA
1c - Indicate client has met eligibility requirements?	Performance (%)	100	98	98	99	99	98
	Consistency Ratio	1.000	.955	.958	1.000	.933	.944
HOW WELL DOES THE COUNSELOR DOCUMENTATION IN THE CASE RECORD...							
3 - Establish the presence of a disability?	Performance (%)	97	79	98	88	93	89
	Consistency Ratio	.981	.742	.972	.983	.917	.819
7 - Show that handicap to employment exists?	Performance (%)	81	65	88	62	86	77
	Consistency Ratio	.778	.682	.653	.917	.617	.694
8 - Show that services can help client achieve goals?	Performance (%)	80	64	79	84	91	81
	Consistency Ratio	.889	.652	.792	.833	.883	.833
	N =	120	119	119	100	98	118

CRS QUESTION WORDINGS

The exact wording of the Case Review items for Section III, pertaining to Standard 10, appears below.

Does the certification of eligibility...

1c. indicate that the client has met the basic eligibility requirements?

How well does the counselor documentation in the case record...

3. establish the presence of a physical or mental disability with necessary medical, psychiatric, psychological, and other information?

7. show that the substantial handicap to employment exists, even though the client is employed, because the client is unable to obtain a gainful occupation consistent with the client's capacities and abilities?

8. show the likelihood of VR services enabling the client to achieve vocational goals consistent with the client's capacities and abilities?

2. that it is harder to establish whether documentation exists or not (as shown by the lower consistency ratios).

Both of these findings may stem from the more subjective and judgmental nature of the latter two criteria, in relation to the first criterion. It should be a fairly straight-forward task to establish the existence of a disability. This requires no more than a doctor's certification that a person is blind (or paralyzed, or deaf, or whatever). Functional assessment results would equally suffice to establish the presence of a disability. Further, a doctor's note, or test results would not just document presence of a disability, they would document it unambiguously. That is, all reviewers would presumably agree that such things constituted adequate documentation. If this argument is true, then we would expect both a high performance level and a high consistency ratio on item 3.

In contrast, items 7 and 8 require more judgment both of the counselor (or other intake/eligibility worker) and of the case reviewer. From the counselor's viewpoint, many other considerations must be accounted for when deciding whether a handicap to employment exists. (For example, does the disability preclude any employment, or just the kinds of employment the client would prefer? Is the disability severe enough to truly preclude employment, or could the client perhaps get a job even without VR help? And so on.) Given the potential complexity of such a judgment, the counselor may forego rigorous consideration of this issue, and instead rely on intuition and past experience. To the extent this occurs, counselors are less likely to document formally the existence of an employment handicap. Turning to the reviewers, the complexity of the issues involved in such a judgment will, almost by definition, make it more difficult to judge whether adequate documentation exists. Further, since reviewers are charged with judging the quality of counselor decisions as well as judging the extent of counselor documentation, the potential for "professional disagreement" increases. That is, one reviewer may judge the documentation provided by the counselor as adequate to establish an employment handicap, while another reviewer judges it inadequate. In short, given the complexity of the issues, we could reasonably expect lower consistency ratios. These problems, for counselors and reviewers, are heightened further when attempting to establish "reasonable expectation."

While explanations can be offered for the lower ratings found on items 7 and 8, we would still consider the ratings as problems needing correction. In our opinion, documentation should be such that there is no doubt that clients have met the basic requirements for eligibility.

Section VII: Termination of Cases

Section VII of the full case Review Schedule contains questions pertaining to the termination process for all closure statuses. The Procedural Standards, in contrast, focus on non-successful closures: 08's (from both 02 and 06), 28's and 30's. For these closure statuses, Standard 10 attempts to assess, (through review of case record documentation) the following compliance issues:

- Does the case record document the ineligibility/termination decision, and the basis for that decision?
- Have clients been granted their legal rights to participate in the ineligibility/termination decision?
- Have clients been informed of their right to an annual review of the decision? and,
- Have the required annual reviews occurred, and the results documented?

The need for this information is two-fold. First, it is reasonable to expect that supervisory personnel might want to review any given case involving ineligibility or unsuccessful termination for any given counselor. Management personnel should have the ability to review cases sampled at random (i.e., across all counselors, as in an audit-type procedure), or to target reviews to particular counselors (as might be needed for less experienced counselors). Either way, it follows that for any case of ineligibility or unsuccessful closure, the closure action and the basis for it must be adequately documented in the case record.

This information in Section VII is important for a second reason, which stems from VR's desire to protect the rights of its applicants and clients. The best way to ensure such client protection is to require proof in the case record that the necessary steps have occurred: for example, a "Bill of Rights" signed by the client; a schedule for review, signed perhaps by the client; and "Results of Review" form, which could be signed by the client.

In short, VR agencies need to know the reaons for unsuccessful closures, and need to ensure that ineligible, and unsuccessful closures are aware of their rights to review. Once this is ensured, then informed clients -- whose circumstances have changed such that they are eligibile -- hopefully will re-enter the system later and are successfully rehabilitated.

Table 43 presents the Section VII results obtained in the pretest. Due to the absence of 08 closures in the states' samples, we are unable to test the CRS items pertaining to ineligibility determinations. However, so that the reader may understand the thrust of this standard with respect to ineligibles, we present the relevant question wordings in Figure 5. We feel it is most unfortunate that 08 closures were excluded from the sample. In effect, this exclusion means that we can assess compliance only for one of the two "sides" of the eligibility question: that is, we can address the issue of whether or not clients admitted for service should in fact have been admitted (the eligible "side"); but we cannot assess whether those denied services should, on the basis of documentation, in fact have been denied. At any rate, the data collection is a fait accompli. The following data discussion will be limited to the issues of 28 and 30 closures.

As can be seen in Table 43, we obtain variation in performance levels and consistency ratios for this section. The table indicates that in many cases there is not unambiguous documentation that the client was consulted about the closure decision, or was informed of the right to participate in an annual review, nor was there documentation that the decision was reviewed within one year (see items 35, 37b, 39). The table shows that many clients are not involved in the closure process, possibly due to loss of contact between clients and the agency. In any case, agencies must be sure they inform as many clients as possible of their rights as status 28/30 closures, and that they provide the required annual review.

Figure 5

SECTION VII. ITEMS PERTAINING TO 08 CLOSURES: NO DATA AVAILABLE IN PRETEST SAMPLE. (Numbers in parenthesis indicate Case Review item numbers.)

CASE CLOSED STATUS 08 FROM 00/02 - INTERVENING REASONS

Does the case record...

(2) document specific reasons for the closure action?

(5) show that the client, or as appropriate, the parent, guardian, or other representative, was advised of the reasons for closure and the closure action taken?

CASE CLOSED STATUS 08 FROM 00/02 - INELIGIBILITY

Does the certification of ineligibility..

(6a) indicate the date of certification?

(6c) include the reasons for the determination of ineligibility?

Does the case record...

(7) show that the client does not have a medically recognized physical or mental disability?

(8) show that the client does not have a substantial handicap to employment?

(9) show that beyond any reasonable doubt the client is not expected to benefit in terms of employability from VR services?

contain data supporting the ineligibility determination, including:

(10a) a summary of medical and other case data obtained during the preliminary diagnostic study?

(10d) documentation of a review of the ineligibility determination not later than 12 months following such determination

(11) show that the ineligibility determination was made only after full consultation with the client, or as appropriate, with the parent, guardian, or other representative?

(12) document that the client was notified in writing of the closure action taken?

document that the client was informed in writing of client rights and remedies, including:

(13a) the right to adminisrative review and fair hearing?

(13c) the right to participate in the annual review of the ineligibility determination.

(14) document any action and decision involving the client's request for an administrative review of agency action or fair hearing?

CASE CLOSED STATUS 08 FROM 06 - INELIGIBILITY

Does the certification of ineligibility...

(17a) indicate the date of certification?

(17c) include the reasons for the determination of ineligibility?

Does the case record...

(18) show that beyond any reasonable doubt the client cannot be expected to benefit in terms of employability from VR services?

(20) contain the rationale for the ineligibility determination as an amendment to the IWRP?

(21) show that the ineligibility determination was made only after full consultation with the client, or as appropriate with the parent, guardian, or other representative?

(23) document that the client was informed in writing of the closure action taken?

(24) document any action and decision involving the client's request for an administrative review of agency action or fair hearing?

(25) document that the ineligibility determination was reviewed not later than 12 months following such determination?

Table 43

Section VII: Termination of Cases - Statuses 30 and 28

DOES THE CERTIFICATION OF INELIGIBILITY...		DE	MI	MS	OR	PA	VA
28a - Indicate date of ineligibility?	Performance (%)	100	93	--	100	63	98
	Consistency Ratio	NA	.576	NA	1.000	.833	1.000
28c - Include reasons for ineligibility?	Performance (%)	100	92	--	98	65	98
	Consistency Ratio	NA	.606	NA	1.000	.792	.972
DOES THE CASE RECORD...							
34 - Contain rationale as an amendment to IWRP?	Performance (%)	92	70	71	100	83	98
	Consistency Ratio	.815	.455	.583	.972	.833	.917
35 - Show that determination was made after consultation?	Performance (%)	78	59	81	70	77	74
	Consistency Ratio	.630	.485	.722	.722	.817	.667
36 - Document that client was notified in writing?	Performance (%)	36	89	61	86	100	94
	Consistency Ratio	.778	.879	.722	.889	.933	.861
37a - Show that client was informed of right of review?	Performance (%)	93	63	56	89	88	96
	Consistency Ratio	.778	.606	.556	.944	.817	.833

CRS QUESTION WORDINGS

The exact wording of the Case Review items for Section VII, pertaining to Standard 10, appears below.

Does the certification of ineligibility...

28a. indicate the date of certification?

28c. include the reasons for the determination of ineligibility?

Does the case record...

34. contain the rationale for the ineligibility determination as an amendment to the program?

35. show that the ineligibility determination was made only after full consultation with the client, or as appropriate, with the parent, guardian, or other representative?

36. document that the client was notified in writing of the closure action taken?

Does the case record show that the client was informed in writing of...

37a. the right to administrative review and fair hearing?

Table 43 (cont.)

DOES THE CASE RECORD...		DE	MI	MS	OR	PA	VA
37b - Show that client was informed of right to participate in annual review?	Performance (%)	91	2	56	20	30	96
	Consistency Ratio	.741	.758	.556	.667	.717	.833
38 - Document action involving request for review?	Performance (%)	9	31	50	13	50	100
	Consistency Ratio	.889	.758	.861	.861	.883	.722
39 - Document that determination was reviewed within 12 months?	Performance (%)	0	13	50	0	43	71
	Consistency Ratio	.889	.788	.875	.833	.917	.778
	N =	120	119	119	100	98	118

CRS QUESTION WORDINGS

The exact wording of the Case Review items for Section VII, pertaining to Standard 10, appears below.

Does the case record show that the client was informed in writing of...

37b. the right to participate in the annual review of the ineligibility determination?

Does the case record...

38. document any action and decision involving the client's request for an administrative review of agency action or fair hearing?

39. document that the determination that the client was no longer eligible was reviewed not later than 12 months following such determination?

STANDARD 12: IWRP

Section IIB: Evaluation of Rehabilitation Potential; Extended Evaluation - Status 06

This section seeks to document that the IWRP's for clients placed into extended evaluation contain all of the information required under status 06. In this context, the concerns of the Procedural Standards are that IWRP's for cases entering 06 do the following:

- define the terms and conditions for the provision of services;
- document that the client was informed of specific rights, including the right to participate in the development of the program;
- specify vocational goal and a timeframe for its achievement;
- specify evaluation procedures and criteria;
- document the final eligibility decision and, for those clients closed as ineligible:
    - -- document that proper information recording procedures were followed;
    - -- document that the client participated in the decision; and
    - -- document that provision was made for periodic review.

Provision of this information helps ensure that the extended evaluation status is used only when appropriate, that clients move through status 06 in a timely manner, and that clients are aware of their rights to continued services or review if declared ineligible.

Table 44 presents the results of Section II-B for Standard 12. As was the case for Standard 10, we encountered data availability problems here. Michigan, Pennsylvania, and Virginia do not appear in the table, because their samples apparently included no cases entered status 06. Further, the remaining three states' applicable samples (i.e., clients who entered 06) were very small. For example, Oregon's 33% performance rating on item 30 is based on only three clients. Given these small numbers, and the inability to compute consistency rations, caution should be exercised when interpreting the results.

Table 44

Section IIB: Evaluation of Rehabilitation Potential; Extended Evaluation - Status 06[a]

DOES THE CASE RECORD...		DE	MI	MS	OR	PA	VA
18 - Contain an IWRP for Extended Evaluation?	Performance (%)	83		70	75		
DOES THE IWRP...							
19 - Present need for Extended Evaluation?	Performance (%)	100		88	100		
20 - Describe client responsibilities?	Performance (%)	90		75	100		
20b - Describe client participation?	Performance (%)	100		75	100		
21a - Document client's right to be fully consulted?	Performance (%)	100		75	67		
21b - Describe the client's right to review?	Performance (%)	100		63	100		

[a] Michigan, Pennsylvania, and Virginia are excluded from this table because they had no data for this section.

CRS QUESTION WORDINGS

The exact wording of the Case Review items for Section IIB, pertaining to Standard 12, appears below.

18. Is there an IWRP for extended evaluation in the case record?

Does the IWRP for extended evaluation (state form)...

19. present the general basis for a determination that an extended evaluation of rehabilitation potential is necessary to make a determination of eligibility?

20. Set forth the terms and conditions for the provision of service, including:
    a. client responsibilities in carrying out the program, such as attendance, cooperation, etc.?
    b. the extent of client participation in the cost of services?

21. document that the client was informed of client rights and remedies, including:
    a. the right to be fully consulted regarding any changes or amendments in the rehabilitation program?
    b. the right to administrative review in case of dissatisfaction with services?

Table 44 (cont.)

DOES THE IWRP...		DE	MI	MS	OR	PA	VA
21d - Describe the client's right to participate in review?	Performance (%)	100		50	67		
21e - Describe the client's right to participate in review of ineligibility?	Performance (%)	100		63	67		
22 - Show the IWRP as a separate part?	Performance (%)	100		75	100		
23 - Show client received IWRP?	Performance (%)	100		88	100		
26 - Indicate client participation in developing program?	Performance (%)	100		88	100		
28 - State intermediate rehabilitation objectives?	Performance (%)	100		50	100		

CRS QUESTION WORDINGS

The exact wording of the Case Review items for Section IIB, pertaining to Standard 12, appears below.

Does the IWRP for extended evaluation (state form)...

- d. the right to participate in the annual review of the program?
- e. the right to participate in the annual review of the ineligibility decision?

22. reflect that the IWRP for extended evaluation was maintained as a separate part of the case record?

23. show that the client received a copy of the IWRP and substantial amendments?

26. indicate that the program was developed and amended with the client's participation, or as appropriate, with the parent, guardian, or other representative?

28. state the intermediate rehabilitation objectives?

Table 44 (cont.)

DOES THE IWRP...		DE	MI	MS	OR	PA	VA
29 - Contain necessary services?	Performance (%)	100		63	100		
30 - Contain initiation date for services?	Performance (%)	100		75	33		
31 - Contain anticipated duration of services?	Performance (%)	100		75	33		
32 - Provide achievement time for objectives?	Performance (%)	100		63	67		
33 - Show an Extended Evaluation assessment every 90 days?	Performance (%)	78		29	100		
34 - State Evaluation criteria?	Performance (%)	90		38	100		

CRS QUESTION WORDINGS

The exact wording of the Case Review items for Section IIB, pertaining to Standard 12, appears below.

Does the IWRP for extended evaluation (state form)...

29. state the VR services to be provided which are necessary for the determination of rehabilitation potential?

30. contain the projected date for the initiation of each service?

31. contain the anticipated duration for each service planned?

32. provide the projected time within which rehabilitation objectives may be achieved?

33. show that a thorough assessment of the client's progress was made at least once in every 90-day period during the provision of services under the extended evaluation?

34. state the objective criteria upon which an evaluation of the client's progress is based?

Table 44 (cont.)

DOES THE IWRP...		DE	MI	MS	OR	PA	VA
35 - State evaluation criteria?	Performance (%)	90		25	100		
36 - Contain schedule for reviews and evaluation?	Performance (%)	60		50	100		
37 - Record results of reviews and evaluation?	Performance (%)	20		25	100		
38 - Show annual IWRP review?	Performance (%)	--		--	--		
39 - Document client opinions concerning objectives and services?	Performance (%)	70		75	100		
DOES THE CASE RECORD...							
42a - Show termination was made with client consultation?	Performance (%)	--		--	--		

CRS QUESTION WORDINGS

The exact wording of the Case Review items for Section IIB, pertaining to Standard 12, appears below.

Does the IWRP for extended evaluation (state form)...

35. state the procedure by which the client is evaluated?

36. contain a schedule for the periodic review and progress evaluation?

37. contain a record of the results of scheduled reviews and progress evaluations?

38. show that a formal, annual review has been conducted if the IWRP has achieved at least first anniversary status?

39. document the client's views, or, as appropriate, the views of the parent, guardian, or other representative concerning the objectives and VR services being provided?

Does the case record...

42a. show that the decision to terminate services was made in full consultation with the client, or as appropriate, with the parent, guardian, or other representative?

Table 44 (cont.)

DOES THE CASE RECORD...		DE	MI	MS	OR	PA	VA
42b - Show rationale as amendment to IWRP?	Performance (%)	--		--	--		
42c - Show certification of ineligibility?	Performance (%)	--		--	--		
42d - Show provision was made for annual review?	Performance (%)	--		--	--		
DOES THE CASE RECORD DOCUMENT THAT THE SERVICE WAS PLANNED...							
43 - Diagnostic and related services?	Performance (%)	58		90	100		
44 - Counseling and guidance?	Performance (%)	50		78	--		
45 - Physical restoration?	Performance (%)	33		70	50		

CRS QUESTION WORDINGS

The exact wording of the Case Review items for Section IIB, pertaining to Standard 12, appears below.

Does the case record...

42b. show that the rationale for the decision to terminate services was recorded as a certified amendment to the IWRP for extended evaluation?

42c. show that a certification of ineligibility was then executed?

42d. show that the provision was made for a periodic review, at least annually, of the ineligibility decision?

Item B: Does the case record document that the service was planned for the client?

Item B is asked in reference to the following services (keyed to CRS question numbers).

Services:

43. Diagnostic and Related Services

44. Counseling and Guidance

45. Physical Restoration

Table 44 (cont.)

DOES THE CASE RECORD DOCUMENT THAT THE SERVICE WAS PLANNED...		DE	MI	MS	OR	[illegible]	VA
46 - Mental restoration?	Performance (%)	25		--	--		
47 - Vocational and other training?	Performance (%)	50		75	25		
48 - Maintenance?	Performance (%)	8		44	--		
49 - Transportation?	Performance (%)	42		33	50		
50 - Services to the family?	Performance (%)	--		--	--		
51 - Specialized services for blind, deaf, severe disabilities?	Performance (%)	--		44	--		

CRS QUESTION WORDINGS

The exact wording of the Case Review items for Section IIB, pertaining to Standard 12, appears below.

Item B: Does the case record document that the service was planned for the client?

Item B is asked in reference to the following services (keyed to CRS question numbers).

Services:

46. Mental Restoration
47. Vocational and Other Training
48. Maintenance
49. Transporation
50. Services to the Family
51. Specialized Services for Blind, Deaf, Severe Disabilities

Table 44 (cont.)

DOES THE CASE RECORD DOCUMENT THAT THE SERVICE WAS PLANNED...		DE	MI	MS	OR	PA	VA
52 - Telecommunications?	Performance (%)	--		11	--		
53 - Occupational licenses, tools, equipment?	Performance (%)	--		--	--		
54 - Other goods and services?	Performance (%)	42		30	--	*	
DOES THE CASE RECORD DOCUMENT THAT THE SERVICE WAS GIVEN...							
43 - Diagnostic and related services?	Performance (%)	58		90	100		
44 - Counseling and guidance?	Performance (%)	42		100	--		
45 - Physical restoration?	Performance (%)	33		100	50		

* Pennsylvania was able to computate item 54: Performance = 100, Consistency Ratio = .917

CRS QUESTION WORDINGS

The exact wording of the Case Review items for Section IIB, pertaining to Standard 12, appears below.

Item B: Does the case record document that the service was planned for the client?

Item B is asked in reference to the following services (keyed to CRS question numbers).

Services:

52. Telecommunications
53. Occupational Licenses, Tools, Equipment
54. Other Goods and Services

Item C: Does the case record document that the service was given to the client?

Item C is asked in reference to the following services (keyed to CRS question numbers).

Services:

43. Diagnostic and Related Services
44. Counseling and Guidance
45. Physical Restoration

Table 44 (cont.)

DOES THE CASE RECORD DOCUMENT THAT THE SERVICE WAS GIVEN...		DE	MI	MS	OR	PA	VA
46 - Mental restoration?	Performance (%)	17		33	--		
47 - Vocational and other training?	Performance (%)	42		100	25		
48 - Maintenance?	Performance (%)	8		60	--		
49 - Transportation?	Performance (%)	42		75	25		
50 - Services to the family?	Performance (%)	--		--	--		
51 - Specialized services for blind, deaf, severe disabilities?	Performance (%)	--		80	--		

CRS QUESTION WORDINGS

The exact wording of the Case Review items for Section IIB, pertaining to Standard 12, appears below.

Item C: Does the case record document that the service was given to the client?

Item C is asked in reference to the following services (keyed to CRS question numbers).

Services:

46. Mental Retardation
47. Vocational and Other Training
48. Maintenance
49. Transportation
50. Services to the Family
51. Specialized Services for Blind, Deaf, Severe Disabilities

Table 44 (cont.)

DOES THE CASE RECORD DOCUMENT THAT THE SERVICE WAS GIVEN...		DE	MI	MS	OR	PA	VA
52 - Telecommunications?	Performance (%)	--		--	--		
53 - Occupational licenses, tools, equipment	Performance (%)	--		--	--		
54 - Other goods and services?	Performance (%)	33		60	--	*	*
	N =	120	119	119	100	98	100

* Virginia and Pennsylvania were able to compute item 54:
Pennsylvania -- Performance - 100
Consistency Ratio - .917

Virginia -- Performance - 100
Consistency Ratio - .000

CRS QUESTION WORDINGS

The exact wording of the Case Review items for Section IIB, pertaining to Standard 12, appears below.

Item C. Does the case record document that the service was given to the client?

Item C is asked in reference to the following services (keyed to CRS question numbers).

Services:

52. Telecommunications
53. Occupational Licenses, Tools, Equipment
54. Other Goods and Services

Section V: Individualized Written Rehabilitation Program - Status 12

In a sense, the purpose of the IWRP is to establish an alliance between the agency and the client for the provision of certain services toward the achievement of a specific vocational goal. As such, it is important that the IWRP contains all the information necessary to establish such an alliance. Section V attempts to document, among other things:

- that the client was informed of the terms and conditions for the provision of services;
- that the client was informed of client rights;
- that the client participated in the full planning and review process; and
- that the IWRP contains essential information such as goals, time-frames, evaluation procedures and schedules, etc.

Provision of this information clarifies the roles, relationships, and duties of agency and client toward achieving the vocational goal, the essence of the IWRP process.

Analysis of the pretest data for Section V (see Table 45) indicates that for the most part the IWRP's contained the required information. Items 1-17 -- documenting that the IWRP sets forth conditions for the provision of services, informs client of client rights, and contains necessary material such as goals, services to be provided, and estimated timeframes -- generally show high performance levels and consistency ratios, with a few exceptions. Among these exceptions are the items concerned with the IWRP's descriptions of the extent of client participation in the cost of services (item 36); and with documenting that the client was informed of the right to be fully consulted regarding changes in the program (item 4a). Performance levels and consistency ratios for these items show that current documentation procedures do not always give an unambiguous indication that clients were informed of certain conditions and rights.

Items 18-26 show a marked reduction in both performance levels and consistency ratios, compared to items 1-17. Items 18-26 pertain to documenting evaluation criteria and procedures, IWRP reviews, termination procedures, and post-closure services. Considering that these items seek to ensure

Table 45

Section V: Individualized Written Rehabilitation Program - Status 12 and Above

DOES THE CASE RECORD...		DE	MI	MS	OR	PA	VA
1 - Contain an IWRP?	Performance (%)	97	98	94	100	99	99
	Consistency Ratio	1.000	.970	.986	.967	.917	.931
DOES THE IWRP...							
2 - Present basis for determination of eligibility?	Performance (%)	99	100	98	100	100	100
	Consistency Ratio	1.000	.924	.542	.967	.933	.833
3a - Show client responsibilities for provision of service?	Performance (%)	94	97	96	98	100	100
	Consistency Ratio	.963	.970	.625	.983	.983	.833
3b - Show extent of client participation in cost of services?	Performance (%)	90	85	55	94	99	55
	Consistency Ratio	.907	.818	.556	.983	.967	.792
4a - Document client was informed of right to be consulted over IWRP changes?	Performance (%)	97	12	98	59	100	100
	Consistency Ratio	.981	.848	.625	.683	1.000	.800
4b - Document client was informed of right to review if dissatisfied?	Performance (%)	97	92	98	94	100	100
	Consistency Ratio	1.000	.848	.625	.933	1.000	.800

CRS QUESTION WORDINGS

The exact wording of the Case Review items for Section V, pertaining to Standard 12, appears below.

1. Is there an IWRP in the case record?

Does the IWRP (state form)...

2. present the general basis for a determination of eligibility?
3. set forth the terms and conditions for the provision of services, including:
    a. client responsibilities in carrying out the program, such as cooperation, attendance, etc.?
    b. the extent of client participation in the cost of services?
4. document that the client was informed of client rights and remedies, including:
    a. the right to be fully consulted regarding any changes or amendments in the rehabilitation program?
    b. the right to administrative review in case of dissatisfaction with services?

Table 45 (cont.)

DOES THE IWRP...		DE	MI	MS	OR	PA	VA
5 - Show that IWRP was separate part of case record?	Performance (%)	100	99	99	100	98	67
	Consistency Ratio	.981	.970	.528	.983	.933	.800
6 - Show client received copy of IWRP and amendments?	Performance (%)	97	93	76	91	89	99
	Consistency Ratio	1.000	.970	.847	.983	.917	.944
9 - Indicate program was developed with consultation?	Performance (%)	90	24	89	92	98	97
	Consistency Ratio	.907	.758	.958	.900	.900	.944
11 - Place emphasis on vocational goals?	Performance (%)	96	96	91	99	94	98
	Consistency Ratio	.926	.970	.917	.967	.933	.958
12 - State long-term employment goal?	Performance (%)	97	98	95	99	97	100
	Consistency Ratio	.981	.970	.986	.950	.950	.986
13 - State intermediate rehabilitation objectives?	Performance (%)	91	17	79	90	93	95
	Consistency Ratio	.907	.879	.819	.833	.983	.903

CRS QUESTION WORDINGS

The exact wording of the Case Review items for Section V, pertaining to Standard 12, appears below.

Does the IWRP (state form)...

5. reflect that the IWRP was maintained as a separate part of the case record?
6. show that the client received a copy of the IWRP and substantial amendments?
9. indicate that the program was developed and amended with the client's participation or, as appropriate with the parent, guardian, or other representative?
11. place primary emphasis on the determination and achievement of a vocational goal?
12. state the long-range employment goal?
13. state the intermediate rehabilitation objectives?

Table 45 (cont.)

DOES THE IWRP...		DE	MI	MS	OR	PA	VA
14 - State services necessary to achieve goals?	Performance (%)	95	86	91	92	95	96
	Consistency Ratio	.926	.758	.889	.950	.917	.944
15 - Contain beginning date for each service?	Performance (%)	97	72	84	89	87	98
	Consistency Ratio	.926	.788	.931	.883	.733	.958
16 - Contain anticipated duration of each service?	Performance (%)	97	58	76	88	85	92
	Consistency Ratio	.907	.727	.931	.850	.717	.875
17 - Provide time frame goals may be achieved in?	Performance (%)	91	85	54	97	89	89
	Consistency Ratio	.796	.803	.681	.917	.867	.847
18 - State evaluation criteria?	Performance (%)	80	36	25	80	63	88
	Consistency Ratio	.778	.803	.708	.700	.583	.875
19 - State evaluation procedure?	Performance (%)	83	74	19	81	56	95
	Consistency Ratio	.926	.697	.722	.767	.567	.944

CRS QUESTION WORDINGS

The exact wording of the Case Review items for Section V, pertaining to Standard 12, appears below.

Does the IWRP (state form)...

14. state the specific VR services to be provided to achieve the intermediate objectives and the employment goal?

15. contain the projected date for the initiation of each service?

16. contain the anticipated duration for each service planned?

17. provide the projected time within which rehabilitation objectives and goals may be achieved?

18. state the objective criteria upon which an evaluation of the client's progress toward an employability goal is based?

19. state the procedure by which the client is evaluated?

Table 45 (cont.)

DOES THE IWRP...		DE	MI	MS	OR	PA	VA
20 - Give schedule for reviews and evaluation?	Performance (%)	74	71	31	80	41	97
	Consistency Ratio	.852	.742	.681	.717	.600	.917
21 - Contain results of reviews and evaluations?	Performance (%)	28	45	17	73	47	17
	Consistency Ratio	.704	.576	.750	.683	.500	.903
22 - Contain formal annual review?	Performance (%)	9	43	21	36	73	40
	Consistency Ratio	.759	.773	.650	.750	.750	.764
23 - Contain client views?	Performance (%)	78	27	79	84	95	90
	Consistency Ratio	.833	.712	.847	.733	.917	.847
DOES THE CASE RECORD...							
24a - Show termination was made with consultation with client?	Performance (%)	83	74	100	71	67	74
	Consistency Ratio	.630	.424	.694	.694	.750	.583
24b - Show termination rationale was amendment to IWRP?	Performance (%)	100	93	82	100	98	98
	Consistency Ratio	.963	.515	.667	.917	.875	.889

CRS QUESTION WORDINGS

The exact wording of the Case Review items for Section V, pertaining to Standard 12, appears below.

Does the IWRP (state form)...

20. contain a schedule for the periodic reviews and progress evaluations?

21. contain a record of the results of the scheduled reviews and evaluations?

22. show that a formal, annual review has been conducted, if the IWRP has achieved at least first anniversary status?

23. document the client's views, or as appropriate, the views of the parent, guardian, or other representative concerning the goals, objectives, and VR services being provided?

Does the case record...

24a. show that the decision to terminate services was made in full consultation with the client or as appropriate, with the parent, guardian, or other representative?

24b. show that the rationale for the decision to terminate services was recorded as a certified amendment to the IWRP?

Table 45 (cont.)

DOES THE CASE RECORD...		DE	MI	MS	OR	PA	VA
24c - Give certification of ineligibility?	Performance (%)	25	48	0	100	31	95
	Consistency Ratio	.630	.394	.694	.917	.667	.889
24d - Show provision was made for periodic review?	Performance (%)	24	6	18	15	35	98
	Consistency Ratio	.741	.636	.611	.556	.500	.833
DOES THE CLOSURE STATEMENT...							
25a - Give description of basis for rehabilitation?	Performance (%)	92	98	87	98	95	98
	Consistency Ratio	.926	.909	.771	1.000	.806	.958
26 - Is there a Post-Employment amendment to IWRP?	Performance (%)	0	2	0	0	0	6
	Consistency Ratio	.644	.788	.750	.861	.783	.708
	N =	120	119	119	100	98	118

CRS QUESTION WORDINGS

The exact wording of the Case Review items for Section V, pertaining to Standard 12, appears below.

Does the case record...

24c. show that a certification of ineligibility was then executed?

24d. show that the provision was made for a periodic review, at least annually, of the ineligibility decision?

Does the closure statement...

25a. a description of the basis upon which the client was determined to be rehabilitated?

26. Is there an amended IWRP for Post Employment Services?

that client rights are being protected, and are important to an overall evaluation of the agency, fully documenting these items is very important.

Section VI: Delivery of Services - Statuses 14, 16, 18, 20, 22, and 32

This section complements the information provided in Section V. When these two are taken together, they describe the overall VR process, consisting of the plan (i.e., the terms, conditions, and information set forth in the IWRP needed to provide services) and the specific program of services undertaken to achieve the vocational goal embodied in the IWRP. Tables 46 and 47 show the frequency with which particular services were planned and delivered. Our interest in these tables is not with performance levels per se, since there is no basis to judge performance as "good" or "bad". Rather, we focus here on the consistency ratios, to give an indication of the clarity of ducmentation. Concentrating on consistency ratios, there are two services that show abnormally low readings. There are evaluation and diagnostic services (item 1 on both tables) and counselling and guidance services (item 2 on both tables). For evaluation and diagnostic services, the consistency ratios are well below the required .750, with one exception. This is interesting, since most applicants receive some sort of evaluation and diagnostic services to determine eligibility. Counselling and guidance services also showed low consistency ratios, but to a lesser extent than item 1. This is even more surprising, given the key role of counseling in VR. Counselors must understand that clear documentation is needed even for "core" services delivered as a matter of course.

Section VII: Termination of Case

The questions in Section VII, relevant to Standard 12, seek to ensure:

- that the rationale for closure decisions are recorded on the IWRP; and
- that the client (or his/her appropriate representative) was consulted prior to the closure decision.

Provision of this information ensures that the agency has a source from which it can draw information about past ineligibility decisions to make sure they were made in a consistent manner and that client rights were protected during the closure process.

Table 48 presents the results of Section VII for status 28 and 30 closures. (Again, as with Standard 10, no data was available on 08 closures.) For item 34, most states provided the rationale for ineligibility as an amendment to the program in most cases. The lower levels of performance must be interpreted with caution, given that their consistency ratios are well below .750.

Item 35, however, presents more of a problem, with only one consistency ratio above the .750 required for a valid result. This would seem to indicate that documenting consultations with clients is difficult as the system is currently set up. Considering that protection of client rights must be a paramount concern of a state VR agency, a more useful documentation procedure may be in order.

Table 46

Section VI: Delivery of Services - Statuses 14, 16, 18, 20, 22, and 32

DOES THE CASE RECORD DOCUMENT THAT THE SERVICE WAS PLANNED FOR THE CLIENT?		DE	MI	MS	OR	PA	VA
1 - Evaluation and diagnostic services	Performance (%)	51	45	52	41	78	44
	Consistency Ratio	.685	.697	.597	.600	.650	.681
2 - Counseling and guidance	Performance (%)	61	68	61	23	92	98
	Consistency Ratio	.926	.682	.583	.683	.967	.972
3 - Physical restoration	Performance (%)	43	21	81	21	60	34
	Consistency Ratio	.944	.955	.944	.900	.833	1.000
4 - Mental restoration	Performance (%)	24	16	0	1	21	16
	Consistency Ratio	.944	.803	.903	.933	.783	.972
5 - Vocational and other training	Performance (%)	63	57	27	79	33	59
	Consistency Ratio	.944	.803	.667	.917	.750	.958
6 - Maintenance	Performance (%)	26	25	12	19	7	21
	Consistency Ratio	.963	.939	.931	.933	.800	.986
7 - Transportation	Performance (%)	43	39	20	56	4	25
	Consistency Ratio	1.000	.894	.819	.783	.817	.986

CRS QUESTION WORDINGS

The exact wording of the Case Review items for Section VI, pertaining to Standard 12, appears below.

Item B: Does the case record document that the service was planned for the client?

Item B is asked in reference to the following services (keyed to CRS question numbers).

Services:

1. Evaluation and Diagnostic Services
2. Counseling and Guidance
3. Physical Restoration
4. Mental Restoration
5. Vocational and Other Training
6. Maintenance
7. Transportation

Table 46 (cont.)

DOES THE CASE RECORD DOCUMENT THAT THE SERVICE WAS PLANNED FOR THE CLIENT?		DE	MI	MS	OR	PA	VA
8 - Services to the family	Performance (%)	2	1	1	0	1	0
	Consistency Ratio	.981	1.000	.917	.983	.800	.986
9 - Specialized services	Performance (%)	4	3	11	2	3	2
	Consistency Ratio	1.000	.970	.819	1.000	.783	.972
10 - Tele-communication	Performance (%)	2	1	3	0	1	1
	Consistency Ratio	1.000	.985	.903	1.000	.800	.972
11 - Occupational equipment	Performance (%)	4	6	7	16	1	5
	Consistency Ratio	1.000	.909	.917	1.000	.800	.931
12 - Other goods and services	Performance (%)	8	12	13	18	4	3
	Consistency Ratio	.926	.833	.875	.900	.800	.903
13 - Placement	Performance (%)	50	40	23	51	65	93
	Consistency Ratio	.778	.773	.806	.767	.600	1.000
14 - Post-employment	Performance (%)	1	Missing	Missing	Missing	Missing	Missing
	Consistency Ratio	.926	Missing	Missing	Missing	Missing	Missing
	N =	120	119	119	100	98	118

CRS QUESTION WORDINGS

The exact wording of the Case Review items for Section VI, pertaining to Standard 12, appears below.

Item B: Does the case record document that the service was planned for the client?

Item B is asked in reference to the following services (keyed to CRS question numbers).

Services:

8. Services to the Family
9. Specialized Services for Blind, Deaf, Severe Disabilities
10. Telecommunications
11. Occupational Licenses, Tools, Equipment
12. Other Goods and Services
13. Placement
14. Post-Employment

Table 47

Section VI: Delivery of Services - Statuses 14, 16, 18, 20, 22, and 32

DOES THE CASE RECORD DOCUMENT THAT THE SERVICE WAS GIVEN TO THE CLIENT?		DE	MI	MS	OR	PA	VA
1 - Evaluation and diagnostic services	Performance (%)	58	47	81	41	75	45
	Consistency Ratio	.833	.652	.556	.617	.633	.708
2 - Counseling and guidance	Performance (%)	61	73	79	19	85	92
	Consistency Ratio	.889	.727	.611	.733	.817	.958
3 - Physical restoration	Performance (%)	41	19	92	21	64	34
	Consistency Ratio	.870	.939	.958	.917	.733	.986
4 - Mental restoration	Performance (%)	20	18	6	0	27	13
	Consistency Ratio	.907	.833	.875	.917	.617	.972
5 - Vocational and other training	Performance (%)	63	63	57	71	36	55
	Consistency Ratio	.926	.818	.639	.800	.567	.889
6 - Maintenance	Performance (%)	25	24	43	19	8	18
	Consistency Ratio	.944	.924	.875	.917	.567	.958
7 - Tranportation	Performance (%)	40	35	55	52	4	24
	Consistency Ratio	.981	.818	.764	.733	.550	.972

CRS QUESTION WORDINGS

The exact wording of the Case Review items for Section VI, pertaining to Standard 12, appears below.

Item C: Does the case record document that the service was given to the client?

Item C is asked in reference to the following services (keyed to CRS question numbers).

Services:

1. Evaluation and Diagnostic Services
2. Counseling and Guidance
3. Physical Restoration
4. Mental Restoration
5. Vocational and Other Training
6. Maintenance
7. Transportation

Table 47 (cont.)

DOES THE CASE RECORD DOCUMENT THAT THE SERVICES WAS GIVEN TO THE CLIENT?		DE	MI	MS	OR	PA	VA
8 - Services to the family	Performance (%)	1	0	14	0	0	0
	Consistency Ratio	.981	1.000	.861	.983	.567	.972
9 - Specialized services	Performance (%)	4	3	35	2	2	2
	Consistency Ratio	1.000	.985	.778	.983	.550	.972
10 - Tele-communication	Performance (%)	2	1	11	0	0	1
	Consistency Ratio	1.000	.985	.861	.983	.567	.958
11 - Occupational equipment	Performance (%)	4	7	29	14	0	5
	Consistency Ratio	1.000	.909	.875	1.000	.567	.958
12 - Other goods and services	Performance (%)	8	9	47	19	6	3
	Consistency Ratio	.944	.833	.861	.900	.567	.889
13 - Placement	Performance (%)	47	72	49	21	38	60
	Consistency Ratio	.759	.788	.750	.700	.517	.694
14 - Post-employment	Performance (%)	0	Missing	13	1	0	1
	Consistency Ratio	.833	Missing	.875	.983	.567	.944
	N =	120	119	119	100	98	118

CRS QUESTION WORDINGS

The exact wording of the Case Review items for Section VI, pertaining to Standard 12, appears below.

Item C: Does the case record document that the service was given to the client?

Item C is asked in reference to the following services (keyed to CRS question numbers).

Services:

8. Services to the Family
9. Specialized Services for Blind, Deaf, Severe Disabilities
10. Telecommunications
11. Occupational Licenses, Tools, Equipment
12. Other Goods and Services
13. Placement
14. Post-Employment

Table 48

Section VII: Termination of Cases - Statuses 30 and 28

DOES THE CASE RECORD...		DE	MI	MS	OR	PA	VA
34 - Contain rationale for eligibility or amendment to program?	Performance (%)	92	70	71	100	83	98
	Consistency Ratio	.815	.455	.583	.972	.833	.917
35 - Show ineligibility was made after client consultation?	Performance (%)	78	59	81	70	77	74
	Consistency Ratio	.630	.485	.722	.722	.817	.667
	N =	120	119	119	100	98	118

CRS QUESTION WORDINGS

The exact wording of the Case Review items for Section VII, pertaining to Standard 12, appears below.

Does the case record...

34. contain the rationale for the ineligibility determination as an amendment to the program?[a]

35. show that the ineligibility determination was made only after full consultation with the client, or as appropriate, with the parent, guardian, or other representative?

---

[a] This is the same wording as used in item 20 (not shown) pertaining to clients closed 08 from 06; except that the word "IWRP" is substituted for "program."

R-300 VERIFICATION

The R-300 Verification procedure is designed to respond to Standard 9. It assesses the degree to which information submitted to RSA on critical items of the R-300 was corroborated by casefile information.

All of the data items on the R-300 Verification instrument (a copy of which follows as Exhibit 10) are necessary to ensure the integrity of the data source on which many of the Performance Standards' data elements are based. One of the purposes of Standard 9 is to verify the R-300 information such that users of the R-300 data can have confidence in the accuracy of the data reported to the states, the department administration, and the Congress.

In this pretest, "verification of accuracy" refers to a manual confirmation procedure intended to insure that file information supports and corroborates the R-300 documents. To minimize the burden of this procedure, only those R-300 items proposed as data items in the Performance Standards' data elements were "verified" by this process.

Training and Logistics

The steps in the R-300 Verification procedure, which in operation usually also involve assessing timeliness of case movement, were as follows:

- Pre-training Logistics
  - -- Negotiate dates with states (usually coincided with SDSU's follow-up visit)
  - -- Utilize same sample selection and dimensions as for CRS
  - -- Review team selection (4-10 reviewers):
    - * Delaware - 3 administrators, 1 program evaluator (R-300 and Timeliness)
    - * Michigan - 10 office managers (R-300)
      4 program evaluation unit staff (Timeliness)
    - * Mississippi - 2 administrators, 5 program evaluators (R-300 and Timeliness)
    - * Oregon - 12 CRS reviewers (Timeliness)
      4 program evaluators (R-300)
    - * Pennsylvania - 12 CRS reviewers (Timeliness)
      10 case review specialists and program evaluators (R-300)
    - * Virginia - 3 administrators, 3 program evaluators, 1 secretary (R-300 and Timeliness)

EXHIBIT 10

TIME STARTED

1	2	3	4	5	6	7	8	9	10	11	12

R-300 VERIFICATIONS

Prepared by

Berkeley Planning Associates
1912 Bonita Avenue
Berkeley, California 94704
(415) 549-3492

To Be Used
in the 6 Model Units
ONLY
for Purposes of
PRETESTING THE PROCEDURAL STANDARDS

February 15, 1980

EXHIBIT 10 (continued)

SECTION I: CASE INFORMATION A. Case Identification	ANSWER COLUMN
1. Reviewer Number	☐☐
2. Reviewer: (1) State (2) Federal (3) Other (specify)________	☐
3. Reviewer: (1) Administrator (2) Supervisor (3) Counselor (4) Clerical (5) Other (specify)________	☐
4. Date of Review:	☐☐ ☐☐ ☐☐ Mo. Day Year
5. State Agency (code):	☐☐
6. Case Number (right justify):	☐☐☐☐☐☐☐☐☐☐
7. Closure Status: (1) 08 from 00 (2) 08 from 02 (3) 08 from 06 (4) 26 (5) 28 (6) 30	☐
8. Does the client's case record contain a copy of the case service report R-300 or the equivalent state statistical reporting form(s)? (1) yes (2) no	☐

NOTE: IMPORTANT INSTRUCTIONS

Respond to items 9-32 by filling in the number in the answer column that indicates your findings relative to the agreement of data found on the R-300 (or its equivalent) to that found in the case record (or other data source, when specifically indicated). The following is a delineation of potential responses and their definitions:

1 = R-300 Confirmed	Case record contains information consistent with that found on the R-300 (or equivalent).
2 = R-300 Contradicted	Case record contains information different from that found on the R-300 (or equivalent).
3 = R-300 Only	Data (including zeros) recorded on R-300 (or equivalent only; no information in case record.
4 = R-300 Missing	No data (blanks) on R-300 (or equivalent).

EXHIBIT 10 (continued)

SECTION I: CASE INFORMATION
R-300 Verification

Continued
Page 2

Is the following information on the R-300, or its equivalent, consistent with that found in the case record (or other data source, when indicated)?

	R-300 Confirmed	R-300 Contradicted	R-300 Only	R-300 Missing
9. The client's age	①	②	③	④
10. The client's Social Security number	①	②	③	④
11. The client's SSDI status at referral	①	②	③	④
12. The client's SSI status at referral	①	②	③	④
13. The client's major (primary) disabling condition	①	②	③	④
14. The disability code for that disabling condition (use the disability code book for verification)	①	②	③	④
15. The client's secondary disability	①	②	③	④
16. The disability code for that disability (use the disability code book for verification)	①	②	③	④
17. Previous closure of the client within 36 months	①	②	③	④
18. If previously closed, the outcome (rehabilitated or not rehabilitated) of the client (if not applicable, fill in 4)	①	②	③	④
19. The client's work status at referral	①	②	③	④
20. The client's weekly earnings at referral	①	②	③	④
21. The client's primary source of support at referral	①	②	③	④
22. Identification of client as TF (Social Security Trust Fund) on the Federal Special Program Identification at closure (Use official transmittal from SSA for verification; if blank on R-300 and no transmittal, fill in 1; if blank on R-300 and transmittal, fill in 2; if check on R-300 and transmittal, fill in 1; if check on R-300 and no transmittal, fill in 3.)	①	②	③	④
23. Identification of client as SF (Supplemental Security Income Fund) on the Federal Special Program Identification at closure (Use official transmittal from SSA for verification; if blank on R-300 and no transmittal, fill in 1; if blank on R-300 and transmittal, fill in 2; if check on R-300 and transmittal, fill in 1; if check on R-300 and no transmittal, fill in 3.)	①	②	③	④

24. Identification of client as SD (Severely Disabled) on the Federal Special Program Identification at closure
(Use criteria in RS Manual for verification;
if blank on R-300 and doesn't meet criteria = 1;
if blank on R-300 and meets criteria = 2;
if check on R-300 and meets criteria = 1;
if check on R-300 and doesn't meet criteria = 2.)
	①	②	③	④

25. The client's SSDI status at closure	①	②	③	④

Exhibit 10(cont.)

SECTION I: CASE INFORMATION
R-300 Verification

Continued
Page 3

Is the following information on the R-300, or its equivalent, consistent with that found in the case record (or other data source, when indicated)?

	R-300 Confirmed	R-300 Contradicted	R-300 Only	R-300 Missing
26. The client's SSI status at closure	①	②	③	④
27. The client's work status at closure	①	②	③	④
28. The client's weekly earnings at closure	①	②	③	④
29. The number of months from client acceptance to closure (Status 10-24)	①	②	③	④
30. The client's outcome status	①	②	③	④
31. If closed 08, 28 or 30, reason for nonrehabilitated closure (if closed 26, fill in 4)	①	②	③	④
32. The total cost of all case services (within a 10% margin of error)	①	②	③	④

To figure 10% Margin of Error

a) Total cost of case services, according to case record. . . . $_____

b) Multiply (a) by 10% . . . . . . $_____

c) Add (b) to (a). . . . . $_____

d) Subtract (b) from (a) . . . . . $_____

e) Total cost of case services, according to R-300. . . . . . . $_____

f) If (e) falls between (c) and (d), the R-300 is "confirmed" = 1. If (e) is greater than (c) or less than (d), the R-300 is "contradicted" = 2.

33. COMMENTS:____

34. Length of time in minutes necessary to complete Section I:_________.

- On-site Training

  Two to three hours of training in R-300 Verification and Timeliness Assessments, based on a process of identifying the appropriate R-300 input documents in the state's case file and establishing what constitutes "corroborating information" on an item-by-item basis.

  Individual application of R-300 Verification and Timeliness Assessment instruments to representative training case.

  Large group discussion to resolve discrepancies and develop consistent judgments.

- R-300 Verification and Timeliness Assessment

  Standardized method of distribution of cases.

  Integrated distribution of same six reliability cases to all reviewers to determine inter-rater consistency.

  Case flow monitored throughout actual case reviews.

Issues Raised During the Pretest

The following discussion presents a synthesis of the comments made by the MEUs as they pertain to various aspects of the R-300 Verification procedure. These include reviewing problems with the instrument and/or the procedure, the perceived utility of the information generated, and the particular concerns of the agencies regarding the feasibility of implementing this procedure using current data collection systems.

Cost and Effort

Regarding the cost and effort involved in verifying the R-300, concern was expressed over the increased time and paperwork requirements placed on administrative and clerical staff. Also, the logistics of having case files removed from the district office for extended periods of time was seen as problematic, especially if these case files were needed in the interim. But the cost and effort involved in the R-300 Verification was seen as a lesser burden than that imposed by the Case Review Schedule. For this reason, some agencies saw no problems in conducting the R-300 Verification on an annual basis.

Comparison to State Methods

The concerns of cost and effort are directly related to the agencies' perception of the adequacy of their data collection system as compared to the requirements of the R-300 Verification procedure. In many states, the data collection system as it is currently maintained does not contain the type of information defined as corroborating an R-300 item.

Table 49 illustrates the "unverifiable items" for each MEU. In some instances (Pennsylvania primarily) the R-300 equivalent was the input form for the R-300 data, and efforts had been made to discourage duplicating information in the files which was already there. In other instances, some information functions had been totally transferred to other departments in the agency (e.g., cost information, Trust Fund and Supplemental Security Income Fund information), and are absent from the case files. In four states, the case file information did not permit a determination of whether the client had been previously closed by the agency and, if so, in what status. For three states, the computer calculates the client's months in status 10-24, and the information is missing from the input document. In Michigan and Oregon, Trust Fund and Supplemental Security Income Fund information is handled elsewhere in the agency, as is cost information in Oregon and Virginia. No procedures were developed for the pretest to deal with other branches of state bureaucracies controlling this information. Rather, consistent codes were assigned in these instances.

Other comments noted that the verification procedure is designed for RSA, not the states. This is a correct observation; R-300 Verification is designed to ensure that the information submitted to RSA is reliable and valid. For this reason, we do not advocate that states be allowed to delete particular R-300 items from their verification procedure, but of course they could add items for verification if they consider them to be of greater importance to the agency.

Possible Benefits

There were many possible benefits which reviewers believed might result from ongoing implementation of the R-300 Verification procedure. The most frequently mentioned benefits were the following:

Table 49

R-300 Verification: Unverifiable Items[1]

R-300 Item	Verification Item Number	DE	MI	MS	OR	PA	VA
1.E.	9				X		
2.A.	10						
2.B.	11						X
2.C.	12						X
2.I.1.	13						
2.I.1.	14			X			
2.I.2.	15						
2.J.	17	X			X	X	X
2.J.	18	X			X	X	X
2.O.	19					X	
2.P.	20					X	
2.S.	21					X	
3.D001	22		X		X		
3.D200	23		X		X		
3.D400	24						
3.G.	25						X
3.H.	26	X					X
3.I.	27						
3.J.	28						
3.M.2.	29	X	X				X
3.N.	30						
3.N.	31						
3.E.1.	32				X		X

---

[1] For a variety of reasons, different states' case files did not contain the type of information defined as corroborating an R-300 item. Consistent codes were assigned in these instances.

- There would be an increase in the accuracy of the data submitted to RSA.
- The procedure would help to identify problem areas within the agency.
- The procedure would improve current data processing systems.
- The procedure would provide greater accountability in terms of client expenditures, status movement, cases documentation, and the use of medical consultation and medical reports.
- The procedure would establish some uniformity with respect to the nationwide collection of data from rehabilitation agencies.
- The procedure will help agency personnel gain insight into casework, provide a better understanding of the R-300, and field problems.
- The procedure might result in better organized case folders and uniformity in reporting procedures.
- Might be a good method of evaluating the forms being used and whether or not basic procedures for completion are being adherred to by the districts.

Thrust of Instrument

Based on an overall evaluation of the proposed procedure, most states agreed that the goals set by Standard 9 are critical to the delivery of quality services. The R-300 Verification is a good check of the reliability and completeness of information submitted to RSA. On the other hand, some states pointed out that verification of information does not take "validity" into account, and that the definition of verification might be broadened to analyze the flow of information through all stages, not just the information on the R-300 versus the supportive evidence.

General Format

There were no major difficulties found in the format of the R-300 Verification instrument. Most found it clear, easy to read, and of a reasonable length. The data collection process and answer scale were structured sufficiently to allow reviewers to make comfortable judgments, but there was some ambiguity about the "R-300 missing" category.

Reviewer Qualifications and Training

Perhaps one of the areas where the greatest amount of concern was expressed was the qualification of the reviewers, and the training required for inter-reviewer reliability. There was agreement that the verification procedure should be done only by people familiar with case files, forms, and the VR process, but no one seemed to agree exactly who met these criteria. To correct any discrepancies among those chosen as reviewers, there was agreement that a comprehensive training format is needed. This training would include reviewing a dummy case to assure understanding of interpretation of items, and advance listing of possible places in the case file where verification data could be found. As for a specific training need, there were suggestions that extra attention be paid to SSI and SSDI cases, as well as cases involving psychotic or psychoneurotic disabilities.

Summary

The previous discussion has raised several issues with respect to the R-300 Verification procedure that need to be addressed. The R-300 Verification is primarily designed to serve RSA's need for quality data. Toward this end, we recommend that there be particular R-300 items that each agency must verify periodically. To ensure that each state can verify these items, some of the data availability problems noted earlier must be corrected; in some cases states may need to change their data collection systems. For example, in states where other agencies have responsibility for maintaining certain data items, the VR agency should arrange to receive copies of the back-up documentation. We feel that, in general, the changes required are justified by the benefits received from reliable, accurate R-300 data. The actual verification procedure seems to be relatively inexpensive and not overly time-consuming, considering the increase in the validity of data analysis made possible through implementation of this procedure.

Results of Pretest Data

Tables 50 and 51 present the results of the R-300 Verification for referral and closure information. As was noted earlier in the discussion of this standard, there are many items on the R-300 that states found to be unverifiable under existing data collection systems. These unverifiable items are presented in Table 49. Taking these into consideration, some of the lower performance levels and consistency ratios shown on Tables 50 and 51 may be explained by the fact that the state(s) considered the items to be unverifiable. In an implemented system, these data availability problems would need to be rectified. On the other hand, some supposedly unverifiable items showed high performance levels with a high degree of consistency among reviewers. We do not know the reasons for this apparent inconsistency.

These problems with differing data collection systems limit the interpretation of results to those items considered to be verifiable and that show an acceptably high degree of inter-reviewer consistency across states. On the positive side, most items collected at referral showed high performance levels and consistency ratios. These items include basic information such as a client's age, Social Security number, primary disability data, work status, and earnings. For closure data, verifying work status at closure and outcome status showed particularly high performance levels and consistency ratios. On the negative side, verifying referral data such as secondary disability information, previous closure information, and primary source of support showed somewhat lower performance levels. For closure data, verifying the reason for non-rehabilitated closure showed consistently low performance levels (mostly below 50%).

Table 50

R-300 Verifications

(Percent of Reviewed Cases for Which R-300 Information is Consistent with that Found in the Client's Case Record)

Referral Data

		DE	MI	MS	OR	PA	VA
Age	Performance (%)	98	100	95	96	99	92
	Consistency Ratio	1.00	1.00	.95	1.00	1.00	.98
Social security number	Performance (%)	100	100	95	98	99	97
	Consistency Ratio	1.00	1.00	.98	1.00	1.00	.98
SSDI status at referral	Performance (%)	94	93	97	81	93	7
	Consistency Ratio	1.00	1.00	.98	.79	1.00	.93
SSI status at referral	Performance (%)	86	95	94	82	92	6
	Consistency Ratio	1.00	1.00	1.00	.75	.98	.93
Major (primary) disabling condition	Performance (%)	88	91	98	97	92	100
	Consistency Ratio	1.00	.98	1.00	1.00	.90	.95
The disability code for major disabling condition	Performance (%)	84	85	3	94	92	99
	Consistency Ratio	1.00	.94	1.00	.92	.92	.91
Secondary disability	Performance (%)	67	83	86	88	84	97
	Consistency Ratio	.92	.82	.91	.96	.87	.91
The disability code for secondary disability	Performance (%)	67	80	87	93	81	97
	Consistency Ratio	.92	.76	.86	.96	.90	.91
Previous closure of the client within 36 months	Performance (%)	2	91	17	75	91	5
	Consistency Ratio	1.00	1.00	.91	.88	.88	.60
Outcome (rehabilitated or not rehabilitated) of the client of previous closure	Performance (%)	2	21	11	10	13	3
	Consistency Ratio	NA	.94	.57	.75	.73	.71
Work status at referral	Performance (%)	96	92	93	98	95	94
	Consistency Ratio	1.00	.94	.95	.96	.98	.88
Weekly earnings at referral	Performance (%)	92	92	94	97	83	91
	Consistency Ratio	.92	.89	.93	.92	.75	.79
Primary source of support at referral	Performance (%)	82	85	80	90	84	93
	Consistency Ratio	.92	.83	.81	.92	.85	.86
	N =	120	119	119	100	98	118

Table 51

R-300 Verifications

(Percent of Reviewed Cases for Which R-300 Information is Consistent with that Found in the Client's Case Record)

Closure Data

		DE	MI	MS	OR	PA	VA
Identification of client as TF at closure[a]	Performance (%)	94	1	99	NA	91	14
	Consistency Ratio	1.00	NA	1.00	NA	.92	.86
Identification of client as SF at closure[b]	Performance (%)	98	NA	100	NA	92	9
	Consistency Ratio	1.00	NA	1.00	NA	.93	.86
Identification of client as severely disabled at closure[c]	Performance (%)	92	90	97	78	87	90
	Consistency Ratio	1.00	.98	.95	.75	.87	.93
SSDI status at closure	Performance (%)	98	92	89	58	90	2
	Consistency Ratio	1.00	.93	.86	.63	.85	.86
SSI status at closure	Performance (%)	94	92	83	59	87	6
	Consistency Ratio	1.00	1.00	.83	.58	.97	.86
Work status at closure	Performance (%)	100	98	95	92	90	95
	Consistency Ratio	1.00	1.00	.93	1.00	.95	1.00
Weekly earnings at closure	Performance (%)	100	92	83	86	78	91
	Consistency Ratio	1.00	1.00	.91	.96	.85	.91
The number of months from client acceptance to closure (status 10-24)	Performance (%)	100	100	96	93	87	0
	Consistency Ratio	NA	1.00	1.00	1.00	.98	.86
Outcome status	Performance (%)	100	100	97	100	94	99
	Consistency Ratio	1.00	1.00	.98	1.00	1.00	.98
If closed 08, 28, or 30, reason for non-rehabilitated closure	Performance (%)	51	48	26	44	49	41
	Consistency Ratio	1.00	.96	1.00	1.00	.97	.95
The total cost of all case services (within a 10% margin of error)	Performance (%)	94	NA	64	1	87	0
	Consistency Ratio	.92	NA	.93	NA	.85	NA
	N =	120	119	119	100	98	118

[a] Social Security Trust Fund, on Federal Special Program I.D.

[b] Supplemental Security Income Funds, on Federal Special Program I.D.

[c] On Federal Special Program I.D.

TIMELINESS ASSESSMENT

The Timeliness Assessment responds directly to Standard 11. It is designed to link subjective assessments of the timeliness of case movement to objective data on the length of time spent in various statuses by different disability types. This will generate a data pool from which one can draw parameters for time-in-status. An example of the Timeliness Assessment can be seen in Exhibit 11.

The procedure for pretesting the instrument was as follows. The reviewers recorded their assessments of a case's timeliness of movement through the VR process. Separate assessments are made for the referral and acceptance stage (statuses 00-08/10), for the plan development stage (statuses 10-12) and for the service process (statuses 12-26/28/30). These assessments are subjective, in the sense that no specific criteria (i.e., times-in-status) are applied to determine timeliness. Rather, the assessments require judgments regarding the appropriateness of the speed of case movement, given the various circumstances impacting on a particular client's caseflow. Reviewers need to be thoroughly familiar with the case circumstances before attempting to assess timeliness. Familiarity was gained completing the CRS, the R-300 Verification instrument, or by conducting an independent review of the case file.

The same cases receiving Timeliness Assessments were also being reviewed by the SDSU CRS. Section I.A. of that instrument (identifying information) recorded the objective data (date of referral, date of eligibility determination, date of IWRP completion, date of closure, client's disability, etc.) needed to link these assessments with other client data in order to develop case flagging analyses. It was not expected that the MEU's would generate a sufficiently large data base to establish timeliness parameters, but rather they would demonstrate whether professionals, with casework knowledge, could reliably assess the timeliness of a case's movement, the sufficiency of documentation in instances of undue delay, and the causes for that delay.

EXHIBIT 11

1	2	3	4	5	6	7	8	9	10	11	12

SECTION VII: TIMELINESS RESEARCH AND COMMENTS

A. TIMELINESS

TIME STARTED ______________

INSTRUCTIONS: As indicators of timeliness of the various phases in the rehabilitation process, consider where applicable the information listed below pertaining to each of the status increments in columns A, B, and C, when responding to questions 1-3.

A. Status 00-08/10 Referral to Eligibility Decision	Time lapses between referral of the client and the initial client interview, the request for information, the receipt of information on the client, additional diagnostic services, extended evaluation (if applicable), and any gaps between or during these events and the final eligibility decision and notification. Date Reference: CRS Section I, Items 11, 18, and 22.
B. Status 10-12 (Eligibility to Plan Approval)	Time lapses between eligibility determination and IWRP approval, amount and frequency of client contact during plan development. Date Reference: CRS Section I, Items 18 and 19.
C. Status 12-26/28/30 (Plan Approval to Closure)	Time lapses between IWRP approval and initiation of services, duration of service receipt, contact with service providers, schedules for counseling, authorization for payment/purchase, client counselor contact, job availability, employer contacts, case record documentation and regular intervals and gaps in the process, especially between status 22 (placement) and closure (where applicable). Date Reference: CRS Section I, Items 19 and 22.

	ANSWER COLUMNS							
	A(00-08/10)		B(10-12)			C(12-26/28/30)		
	Yes	No	Yes	No	N/A	Yes	No	N/A
1. Was the client served in a timely manner; i.e., without undesirable or unintended time lapses? (If Yes respond to this Item in the next column.)	①	②	①	②	③	①	②	③
2. If No, was the delay sufficiently explained in the case record?	①	②	①	②		①	②	
3. Which of the following reasons caused the delay?								
a. No response by client?	①		①			①		
b. Client indecision?	①		①			①		
c. Client unavailability?	①		①			①		
d. No contact by counselor?	①		①			①		
e. No action by counselor?	①		①			①		
f. No counselor assigned?	①		①			①		
g. Administrative delays?	①		①			①		
h. Lack of resources?	①		①			①		
i. Delay in receiving reports?	①		①			①		
j. Interagency delays?	①		①			①		
k. Lack of placement opportunities?	①		①			①		
l. Other? (specify______________________)	①		①			①		

4. Length of time in minutes necessary to complete timeliness section: ☐☐

Training and Logistics

Training for the Timeliness Assessments took place in each state either as an adjunct to the Case Review procedure (Oregon and Pennsylvania), to the R-300 Verification procedure (Delaware, Mississippi, and Virginia), or as an independent activity (Michigan).

Issues Raised During the Pretest

Cost and Effort

No MEU expressed any real concern about the cost or effort involved in conducting the Timeliness Assessment. When an MEU expressed concern about the Timeliness Assessment, it was usually in relation to the design of the procedure, or some special circumstance peculiar to the agency that might distort the results of the assessment.

Comparison to State Methods

Most MEU's either lacked case-flagging procedures, or have found their present systems to be inadequate. The greatest problem with existing systems seems to be the divergence of opinion between counselors, field administrators, and program evaluators as to what constitutes untimely service. Some systems are based on administrative standards of timely case movement, and some are based on normative standards of case movement. One MEU pointed to particular problems encountered in using its fixed time-in-status system (the system provides a semiannual printout which flags cases staying in particular statuses too long). The reviewer noted that the system simply created more work for counselors, and usually provided information too late to be useful (clients had often moved on to later statuses before the counselor was alerted to the "problem").

Possible Benefits

With the ultimate goal being the development of a workable case-flagging procedure, most MEU's found the Timeliness Assessment to be an appropriate and needed Procedural Standard. Some possible benefits of implementation of this procedure include:

- More attention will be paid to clients staying in a particular status too long;
- The Timeliness Assessment will aid greatly in pinpointing problems in service delivery;
- The procedure may result in an increase in successful rehabilitations, as some MEU's believe efficient case movement is related to outcome;
- The procedure may improve documentation of time-in-status required to complete the VR process.

Thrust of the Standard and Instrument

Some MEU's were concerned that the system, as it is now designed, seems to define "untimely" as "too slow," and seems to ignore cases where "untimely" movement results from the client being rushed through some stages of the VR system. If this system is implemented, reviewers felt that pressure for timely service may result in counselors attempting to speed client movement through the various statuses. We consider this to be a valid concern. The instrument must be revised to allow identification of too-fast movement, as well as movement which is too slow.

Another concern expressed about the Timeliness Assessment was that it might fail to function effectively when an agency, due to declining resources, implements a waiting list. Use of a waiting list is expected to increase the time spent in status 02, and thus to distort assessments of timeliness during the referral/acceptance process. We agree that this presents a potential problem. During training, all reviewers need to be made aware of the potential for this problem. It should be noted that item 3a -- "lack of resources" -- does allow for an explanation by reviewers. However, given the potential for widespread occurrence of this problem, it might be better to not code such cases as timeliness problems when it is clearly established that the client was on a waiting list.

Format

For the most part, the MEU's found sections A and B of the instrument easy to assess. Section C, however, presented more of a problem, as this section requires more judgment and does not usually contain "obvious" delays.

As noted earlier, reviewers were primarily concerned with the subjectivity of the timeliness decision, but this concern was further heightened by the format of the instrument itself. For example, when attempting to identify the causes for untimely case movement, frequency of counselor/client contact can be misleading: quality of contact (i.e., information exchanged and progress made) is more important than quantity of contact. Also, the "causes of delay" (items 3a-3i) were thought to contain some overlapping categories, and in some cases the documentation may not give a clear indication of all actual causes for delay. For example, "lack of counselor contact" may be due to "lack of resources" or "administrative delays." Our response to this last problem is as follows. Ideally, with sufficient training and reviewer familiarity with the VR service process, and with improved documentation (resulting from implementation of the Procedural Standards), it is hoped that reviewers will actually be able to identify as many causes for delay as apply to a particular case. This will allow greater understanding of common simultaneous problems, and of the root (i.e., main cause) of those problems. This information could be used to smooth the case flow and improve agency functioning.

Training

To minimize the subjectivity of Timeliness Assessments, all MEU's agreed that extensive training of qualified reviewers is needed. This training must include teaching consistent definitions of terms and materials to help standardize interpretations, and taking time to thoroughly analyze example cases to make the best possible, though subjective, assessment of timeliness.

Summary and Response

The major concerns of reviewers related to the inherently subjective nature of the Timeliness Assessments, and to the failure of the form to allow for explicit identification of cases which moved too fast. We have already noted the need to revise the form to correct the second problem. With regard to the subjectivity problem, we would note that the problem will always exist to some extent. However, we feel that uniformity of interpretation by reviewers can be maximized by using the following procedures. First, provide adequate training on agency and federal terms, on source documents, and on current best practice. Second, choose reviewers from among staff with adequate experience in casework and, hopefully, in casework supervision and agency operations. These people will have a head-start in terms of familiarity with definitions and documents, and they should already be familiar with "best practice" (even if not the most current best practice). Third, conduct "dry runs," and have reviewers discuss commonly reviewed (i.e., reliability) cases, before the data collection process proceeds too far. This should serve to point out potential consistency (and subjectivity) problems in advance. Finally, use the same reviewer to collect all the Procedural Standards data for a particular case, and have the reviewer conduct the data collection in the following order:

1) R-300 Verification
2) CRS or MCRS (Eligibility and IWRP)
3) Timeliness Assessment.

By following this order, the reviewer is forced to digest as much "objective" background information as possible, and should have an understanding of the case which is exceeded only by the counselor and possibly by the relevant counselor supervisor. This level of "objective" knowledge and understanding can only help the reviewer in making the required "subjective" timeliness assessment.

Results of Pretest Data

Timeliness in Acceptance Stage

Table 52 presents the results of the Timeliness Assessment for cases in the acceptance phase, covering movement through statuses 00-08/10. As shown by the table, the percentage of cases served in a timely manner in each MEU ranged from 59%-95%. Corresponding consistency ratios for these assessments were generally over the .750 required for a valid result, with one exception. These results would seem to indicate that for the most part casefiles contained the documentation necessary to make a Timeliness Assessment, and in most cases the client moved through the acceptance phase in a timely manner.

For those cases not served in a timely manner, casefile documentation showed potential reasons for the delay in 17%-80% of the cases. Among those reasons most frequently mentioned were:

- No response by client
- No contact/action by counselor
- Delay in receiving reports

Timeliness in Plan Development Stage

Table 53 presents the results of the Timeliness Assessment for cases in the plan development stage, covering movement through statuses 10-12. The percentage of cases served in a timely manner through these statuses were all over 80%, with all consistency ratios above .750. These results are somewhat higher than for the acceptance phase, showing that once accepted into the system, clients move at an appropriate pace into actual services.

For those cases not receiving timely service in the plan development stage, casefile documentation gave potential reasons for the delay in 31%-100% of the cases. Among those reasons most frequently given were

- No response by client
- Client unavailability

Table 52

Timeliness Assessment

00-08/10 Acceptance

	DE	MI	MS	OR	PA	VA
% Served in a Timely Manner	59%	71%	88%	93%	93%	95%
Consistency Ratio	.50	.96	.98	.87	.81	.95
Untimely cases explained	NA	39.3%	57.1%	50%	16.7%	83.3%
Reasons: a. No response by client?	✓	✓	✓	✓		✓
b. Client indecision?	✓	✓	✓			✓
c. Client unavailability?	✓	✓	✓			✓
d. No contact by counselor?	✓	✓	✓	✓	✓	
e. No action by counselor?	✓	✓	✓	✓	✓	
f. No counselor assigned?	✓					
g. Administrative delays?	✓			✓		✓
h. Lack of resources?						✓
i. Delay in receiving reports?	✓	✓	✓	✓	✓	✓
j. Interagency delays?	✓				✓	
k. Lack of placement opportunities?						
l. Other (specify)	✓		✓			✓

Table 53

Timeliness Assessment

10-12 Plan Development

	DE	MI	MS	OR	PA	VA
% Served in a Timely Manner	80%	84%	99%	97%	91%	98%
Consistency Ratio	.75	.75	.93	.96	.82	1.000
Untimely cases explained	36.4%	31.6%	100%	NA	55.6%	NA
Reasons: a. No response by client?	✓	✓	✓	✓	✓	
b. Client indecision?		✓				
c. Client unavailability?	✓	✓		✓	✓	✓
d. No contact by counselor?	✓	✓		✓	✓	
e. No action by counselor?	✓	✓			✓	✓
f. No counselor assigned?		✓				
g. Administrative delays?	✓	✓			✓	✓
h. Lack of resources?		✓				
i. Delay in receiving reports?		✓			✓	
j. Interagency delays?	✓	✓			✓	
k. Lack of placement opportunities?						
l. Other (specify)		✓				

Timeliness in Service Provision Stage

Table 54 presents the results of the Timeliness Assessment for cases in the service provision stage, covering movement through statuses 12-26/28/30. The percentage of cases served in a timely manner through these statuses ranged from 42%-94%, with consistency ratios of between .50 to .88. These results are somewhat lower than for the previous tables, showing that some clients are bogged down in these statuses, and that in many cases the casefiles possibly do not contain the documentation needed to make a Timeliness Assessment. The subjectivity issue no doubt also is relevant here.

For those cases not served in a timely manner, casefile documentation gave a potential reason for the delay in 48%-65% of the cases. Among those reasons most frequently given were:

- No response by client
- Client indecision
- Client unavailability
- No contact by counselor
- No action by counselor

General Observations about the Timeliness Assessment Data

The three previous discussions have presented the results of the Timeliness Assessment for the MEU's, covering movement through all statuses of the VR process. From these discussions, some general observations can be made about timeliness assessments. First, while more data from more states is needed before performance levels can be interpreted with confidence, the results of the pretest suggest that current documentation procedures are not complete enough to allow for a clear Timeliness Assessment. This is reflected by the low consistency ratios shown for various stages of the VR process. Also, cases that have not been served in a timely manner do not contain adequate documentation of the possible reasons for the delay. This is reflected by the consistently low percentage of untimely cases where the reason for the delay is given. If the agency is to improve the timely delivery of services, it must have an indication of what is causing the delays.

Table 54

Timeliness Assessment

12-26/28/30 Service Provision to Closure

	DE	MI	MS	OR	PA	VA
% Served in a Timely Manner	42%	55%	77%	68%	94%	75%
Consistency Ratio	.50	.79	.86	.70	.83	.88
Untimely cases explained	62.5%	48.8	NA	NA	56.3%	65.4%
Reasons:						
a. No response by client?	✓	✓	✓	✓	✓	✓
b. Client indecision?	✓	✓	✓	✓	✓	✓
c. Client unavailability?	✓	✓	✓	✓	✓	✓
d. No contact by counselor?	✓	✓	✓	✓	✓	✓
e. No action by counselor?	✓	✓	✓	✓	✓	✓
f. No counselor assigned?	✓	✓		✓		✓
g. Administrative delays?	✓	✓	✓	✓		✓
h. Lack of resources?	✓	✓				
i. Delay in receiving reports?	✓	✓	✓	✓		✓
j. Interagency delays?	✓	✓				✓
k. Lack of placement opportunities?		✓		✓		
l. Other (specify)		✓	✓	✓		✓

A Model for Case Timeliness Monitoring

The MEU pretest allowed exploration of timeliness in six state agencies. Because this issue is recurrent in the discussion of standards, and has been addressed by RSA in the existing General Standards, RSA and BPA felt that further investigation was warranted. Therefore, in addition to the MEU data collection in the pretest, BPA sent a request to all state agencies for documentation on their current case flagging procedures and on other, more general, quality assurance approaches. We provide a detailed analysis of the findings of both an analysis of the MEU pretest data and a review of current state case flagging systems in another report.[1] Here, we summarize BPA's recommendations from that report, including a model for state case flagging systems which integrates state concern for excess time in process with the use of timeliness assessment procedures.

BPA reported in the review of existing state timeliness systems that there are numerous approaches to monitoring cases for undue delay. The selection of a "best approach" is not currently possible, since our analysis showed a variety of state conditions and client characteristics that may affect both the time in status itself and a rater's own assessment of the "timeliness" of a particular case. While the MEU standards pretest data sheds some light on the relationships of timeliness and time in process to outcome of cases, the limited sample and measurement issues preclude our ability to project the findings for all state VR agencies or even classes of agencies. However, this investigation does indicate that a concern for timeliness is important both for assuring the quality of case services, and for providing the best chance for successful outcomes of these services. Based on the analysis, BPA recommends:

- That any case flagging procedure recommended by RSA must be reliable across states. Trained raters should apply the same procedures and specific criteria across states if the findings are to have validity and reliability. Such an approach argues for assessments done by RSA at the regional level or by a national assessment project rather than by states' individual staff.

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[1] Review of State VR Agency Procedures for Case Flagging and Quality Assurance (September, 1981).

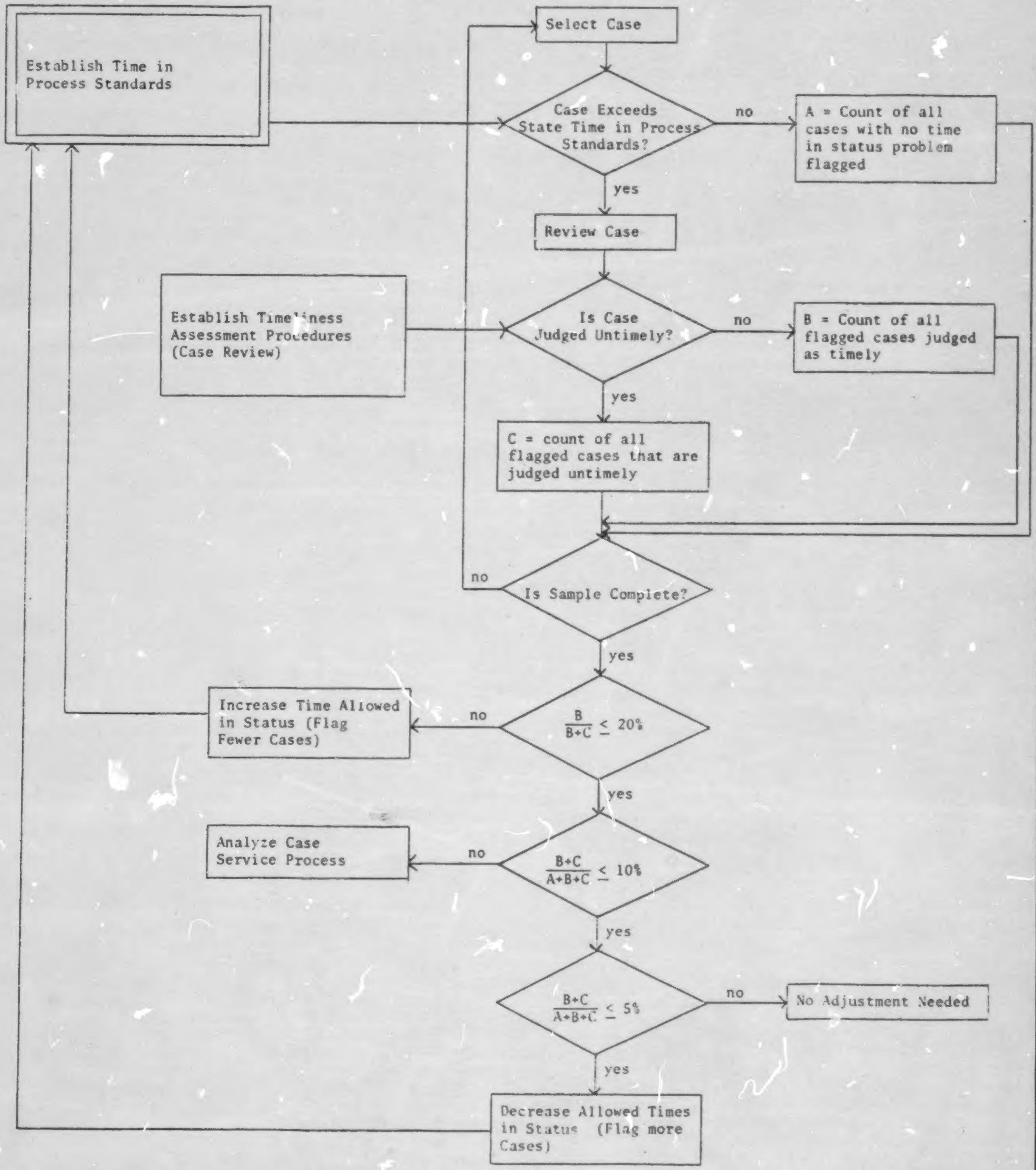
- The procedures should focus on identification of untimely practice, overall, by type of plan, by types of client, and by status. This identification should be developed from data analysis on improved measures of timeliness and improved documentation of times in status on the R-300.
- With improved measures, more analysis can be done on the relationships between times in status and timeliness assessments, and outcome data from the R-300. Such analysis will lead to identification of norms for case flagging, and provide a component of the supportive evaluation or decision support system for RSA MIS.

This, our long-run recommendation is that timeliness measures and procedures must be improved and be more uniformly applied to a large number of cases before an empirical basis for setting timeliness norms is possible. We see this developmental work as becoming more possible through the MIS, if timeliness assessments and status times are included in the data elements and if the uniform assessment practices are followed in collecting the data.

In the short run, we suggest the following model for improvement of case flagging practice and use of time in status standards at the state level. A state should not flag too many cases, because such flagging would be inefficient. However, flagging too few cases will possibly leave too many untimely cases in the system without examination. The model, therefore, is based on examining the number of cases being flagged with the states' existing flagging standards, in relationship to an analysis of the service process and the overall caseload, and refining state flagging standards.

Figure 6 shows the steps to follow in the analysis of undue delay in the caseload. A case is selected for review, following the sampling design used by the state agency for timeliness review (100% of all cases, or state random sampling procedure). State timeliness standards (allowed times in process) will be used in this model. The model calls for upwards or downwards adjusting of these times in process standards (increases or decreases in the maximum time allowed in each status) based on two additional standards for the caseload itself:

Figure 6: Model Case Flagging System


Establish Time in Process Standards
Select Case
Case Exceeds State Time in Process Standards?
no
A = Count of all cases with no time in status problem flagged
yes
Review Case
Establish Timeliness Assessment Procedures (Case Review)
Is Case Judged Untimely?
no
B = Count of all flagged cases judged as timely
yes
C = count of all flagged cases that are judged untimely
no
Is Sample Complete?
yes
Increase Time Allowed in Status (Flag Fewer Cases)
no
$\frac{B}{B+C} \leq 20\%$
yes
Analyze Case Service Process
no
$\frac{B+C}{A+B+C} \leq 10\%$
yes
$\frac{B+C}{A+B+C} \leq 5\%$
no
No Adjustment Needed
yes
Decrease Allowed Times in Status (Flag more Cases)

1. Not more than 20% of flagged cases should be timely. If more than 20% of the flagged cases are judged as timely when they are reviewed, the system is flagging cases unnecessarily, and the flagging standards should be less stringent (times allowed in the statuses could be increased).
2. Assuming the conditions in (1) above hold, at least 5% but not more than 10% of all cases should be flagged. If such excessive flagging occurs, and the flagging represents cases judged untimely, then there is a problem with the service delivery system itself, and an analysis of the process is called for. If less than 5% of cases are flagged, the flagging system should be more stringent (times allowed in statuses should be decreased).

The model in Figure 6 uses both quantitative information on times in status and subjective information on timeliness to decide about cases.[1] In the first stage, a case is selected for attention. If time in process is all right for the case, it is returned to the file. If time in process exceeds agency standards, the case is flagged and reviewed as to the timeliness of process. As we have pointed out, while there is a relationship between timeliness and time in process, it is not a one-to-one relationship, so it is possible that flagged cases will be judged timely. If so, they also can be returned to the file. For both these groups returned to the file (labeled A and B on our diagram), the number of such cases should be recorded. Likewise, the number of untimely cases flagged should be counted. (In our diagram, this is C.) Cases should be flagged and reviewed until the planned sample size (A + B + C) is achieved.

Once the sample is complete, the system asks three questions of the cases. First, do the timely cases (B) exceed 20% of all flagged (B + C) cases? If yes, the system may be flagging too many cases, and times allowed for each status could be increased. If, however, B/(B + C) is less than 20%, we ask whether less than 10% of the total caseload was flagged. If so, then the time in process standards appear in equilibrium for the state (not too many cases are being flagged; of the cases that are flagged, most of them are indeed untimely cases). If, on the other hand, more than 10% of the cases are flagged, there is a problem in the service process itself, since these cases have been judged as untimely and there are too many untimely cases for efficient monitoring and efficient operations. This calls for an examination of the service process itself, perhaps using the decision support system to analyze the state caseload process and pinpoint timeliness issues in relationship to client outcomes and costs. In addition, this problem may call for upward adjustment of the times allowed in statuses, to flag fewer cases. However, checking for the appropriate times must be done in another iteration so that a check can be made as to whether both the 20% and 10% standards are met for a given new standards level.

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[1] The model is, however, concerned only with times-in-status which are too long; it does not address "rushed" cases. Cases handled with "undue speed" are a separate issue requiring special state attention.

Finally, the state should routinely flag between 5% and 10% of its cases, to assure that flagging standards are set low enough. If less than 5% of cases are flagged, the standards should be made more stringent (allowed times in status decreased) before the next round of review.

Using this approach, states can adjust their times in status standards upwards or downwards to be more meaningful and to result in an efficient process that spots problematic cases without excessive monitoring.

IX. SUMMARY AND RECOMMENDATIONS FOR THE PROCEDURAL STANDARDS

In previous sections we have discussed the form of and rationale for the proposed Procedural Standards; the data collection instruments proposed for implementing the Standards; the pretest process; and the findings obtained from the pretest data. As well, we synthesized the comments received from pretest participants. In this section our purpose is to summarize the participants' comments into a coherent statement of how reviewers perceived the overall Procedural Standards pretest effort -- that is, what was good and what was bad -- and to use the understanding gained from the pretest to develop an improved Procedural Standards system design, suitable for nationwide implementation.

Beginning with the positive, reviewers in general felt that the proposed Procedural Standards are appropriate for inclusion in the overall VR evaluation system. We feel that this is a correct assessment. Considering each of the Standards in turn, we would assert that:

- RSA needs assurance that the basic data it receives from states on clients served is valid, accurate, and reliable, as required by Standard 9. Data validity is important since the data is used by RSA both for reporting to Congress, and for performing program and policy analyses intended to help improve the program.

- State agencies must follow federal regulations regarding eligibility and provide adequate documentation of the basis for eligibility decisions, as required by Standard 10. This is important so that state agencies, through their "gate-keeping" function, may reserve services for those individuals meeting the criteria for need established by Congress. By extension, this issue is important due to its impact on an agency's coverage and on its fundamental cost-effectiveness.

- Agencies should endeavor to ensure that clients move through the VR process at a pace which is "appropriate to their needs and capabilities," as required by Standard 11. We feel this concept is appropriate for a standard, since it is one of the areas of service quality over which counselors and agencies can exercise the greatest control.

- Agencies should ensure that clients are provided IWRPs as appropriate, and that the IWRP provisions (e.g., client participation and due process) are adhered to. This is important both from a compliance standpoint, and in relation to the service quality issues embodied in the IWRP legislation.

In short, we remain convinced that the Standards as stated are appropriate for inclusion in VR's overall evaluation system. Further, we feel that our viewpoint is supported by comments received from the pretest participants.

The next major positive point to note is that, overall, reviewers seemed to feel that the proposed data collection instruments are appropriate for use in assessing state agency compliance with the Procedural Standards. This conclusion must be tempered by an understanding of exactly what is meant by "appropriate". As discussed earlier (and as will be discussed below) reviewers actually perceived various problems with the instruments when considered within the environment of the Procedural Standards pretest. However, in terms of their appropriateness in addressing the concerns of the Procedural Standards, the instruments actually received fairly high marks from reviewers. For example, the Case Review Schedule was seen as providing a thorough assessment of compliance with both the eligibility and IWRP provisions of the Rehabilitation Act. True, some sentiment was expressed that the CRS "may be more detailed, time-consuming, and critical than what is needed to evaluate compliance." However, we interpret this statement to mean "what is minimally needed to get a general picture of compliance." While RSA may, someday, decide that a general picture is adequate, we believe that currently RSA desires a more comprehensive picture of the extent to which states are complying with the full intent of the relevant legislative mandates. The CRS provides just such a picture. The only caveat we would add is this: if the Standards are implemented, we would recommend that the Modified Case Review Schedule be used to reduce the overall time requirements.

Similarly, both the R-300 Verification and the Timeliness Assessment instruments were seen as capturing the intent of their relevant Standards, overall. Two fairly significant problems were noted, however. First, as regards the R-300 Verification, the point was made that in fact the instrument fails to assess validity of R-300 data (i.e., to validate that the R-300 reflects "reality"). Since it relies solely on written documentation, the instrument is useful only for checks of accuracy vis-a-vis backup documentation. We agree with this assessment. To correct this problem, we would suggest that as part of the data collection methodology, procedures be implemented for conducting reality checks on items considered key for reporting and analysis (e.g., conduct employer surveys to validate closure occupation, and wages). Given their cost, these checks should be conducted infrequently, for example every three to six years; but they would go far toward lending confidence in the accuracy and validity of the major data system used in VR.

The second problem noted by reviewers concerned the absence on the Timeliness Assessment of any method for identifying cases where the process moved too fast. As stated earlier, we feel this is a legitimate concern. Our guidance materials will include a revised Timeliness Assessment Instrument which addresses this concern.

In sum, we believe that, overall, our reviewers reacted positively to the content of the data collection instruments in terms of their appropriateness for assessing compliance with the Standards.[1] In addition, the reviewers noted a variety of incidental benefits which potentially would be derived from collecting the Procedural Standards data. Among the benefits noted were the following:

- improved case records;
- greater understanding of scope and intent of federal mandates;
- greater attention to the concerns embodied in the Standards (this of course is the basic intent of including Procedural Standards in the evaluation system);
- uniform assessment of performance; and
- better understanding (by reviewers) of agency operations, caseload practices, and documentation procedures.

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[1] We have omitted discussion of various negative comments regarding instrument and question format and question wording. We consider most of the issues raised in these comments to be of minimal significance and, in general, misdirected. The comments, and our responses, are presented in Chapter X.

Given the various points presented above on the proposed Procedural Standards and data collection instruments, we feel justified in recommending that the Procedural Standards and instruments be implemented in the general form used in the pretest; that is, after the Timeliness Assessment has been revised and provision has been made for validity checks of R-300 data. We are further encouraged in making this recommendation given our reviewers' perceptions of the appropriateness of the Standards and the overall acceptance of the data collection instruments. However, while we feel justified in making this basic recommendation regarding whether and how performance should be assessed, there were a variety of issues (i.e., problems) raised during the pretest which should be considered when devising detailed recommendations for Standards implementation. We briefly discuss these problems below. Following this, we attempt to draw out the implications of these comments for an improved design of the Procedural Standards system.

SUMMARY OF PROBLEMS NOTED DURING THE PRETEST

The pretest participants noted a variety of problems which they either: (1) experienced during the conduct of the pretest, or (2) anticipated, should the Procedural Standards be implemented as an on-going activity. These perceived problems can be grouped into five broad areas, as discussed below.

- First and foremost, the Procedural Standards were seen as requiring an excessive level of effort in order to adequately assess performance. This perception applied especially to the Case Review Schedule. The central issue, of course, is the amount of staff time required to conduct the Procedural Standards data collection. Additionally, participants anticipated problems resulting from the intrusion of the data collection process into the time available for staff to perform their regular duties (e.g., counseling, case supervision, etc.).

- Second, the pretest illustrated clearly that some method must be developed to overcome problems in data collection resulting from the unique aspects of each state. In particular, the CRS and the R-300 Verification instrument presume a uniformity across states which in fact does not exist.

Problems were encountered as a result of unique procedures within states -- in situations where the law allows states some latitude for policy implementation -- which conflict with what the CRS implies is "correct". As well, both the CRS and the R-300 Verification instrument, by their nature, fail to allow for differences across states in terms of the type of documentation which can be used (or, is sufficient) to establish compliance with various federal regulations. The problem here, as we see it, results less from the instruments' alleged inadequacies than from inadequate advance work done prior to the data collection, which could have established: (1) how the state is different, and therefore (2) how to respond to the review questions, given the state's unique aspects.

At a more mundane level, reviewers also experienced some problems in locating certain data or documentation due to unique aspects of the documentation procedures in states. For example, reviewers who were (apparently) unfamiliar with the state's R-300 equivalent had some difficulty making the necessary correspondence between the R-300 equivalent and the R-300 Verification instrument. As well, certain data was missing from case files altogether, not because of counselor negligence, but because of inter-agency divisions of responsibility for maintaining certain records or documentation. For example, in some states, documentation of public assistance receipt may be maintained by state Departments of Welfare. These types of situations caused particular items on the instruments to be "not applicable," by definition. Further, if a reviewer was unaware of such inter-agency arrangements, he/she might mistakenly judge cases to be out of compliance.

- The third problem concerns the subjectivity of judgements required by various review questions. In the case of the R-300 Verification instruments, the subjectivity issue was related to the problems discussed above, pertaining to accessibility (i.e., agency location) of documentation; and to advance knowledge needed for certain review questions regarding the documents which sufficiently established compliance. For the CRS, subjective judgements were required both to judge whether or not the documentation was sufficient to establish compliance, and (for certain questions) to judge the appropriateness of services provided, decisions made, and so forth. Finally, the Timeliness Assessment required the most subjective judgements of the three instruments. Many reviewers found it difficult to judge the appropriateness of case progress, and to determine the reasons for undue delay.

- A fourth problem noted by some reviewers was that they anticipated that "continual" training would be required if reviewers were to perform their function adequately and efficiently, once the Procedural Standards are implemented. This issue arises, no doubt, directly as a result of the effort, "uniqueness," and subjectivity issues already discussed.

- Finally, a few reviewers expressed their belief that there would be inadequate opportunity for feedback, and that such feedback as might be provided would be of little use in improving current operations. This perception seems to have resulted from two distinct factors. First, reviewers (correctly) perceived the Procedural Standards as having a distinct federal (i.e., RSA) focus. Given this focus, reviewers may simply have assumed that the Procedural Standards would be of little use to states. Second, the pretest sample contained only closed cases. By excluding in-service cases, states are unable to intervene to correct any problems which may be occurring with the current caseload.

IMPLICATIONS OF OBSERVED PROBLEMS FOR IMPROVING THE PROCEDURAL STANDARDS SYSTEM DESIGN

Having provided an overview of the problem issues brought up during the pretest, we will now attempt to respond to those concerns by recommending specific approaches as regards various aspects of the overall Procedural Standards system design. The questions to be addressed include:

- How frequently should Procedural Standards data collection and reporting occur?
- What sorts of criteria (in terms of qualifications and experience) should be used in selecting reviewers?
- How can reviewer training be made most effective?
- How can data collection be made most efficient, and how can we enhance the utility of reported data?
- Who shall have responsibility for data collection and reporting: RSA, or the states?
- Finally, how shall we adapt the data collection to reflect variations in states' policies and procedures?

Frequency of Data Collection and Reporting

We need to strike a balance between "underreporting" of Procedural Standards data (that is, allowing long time periods to elapse between the data collection/reporting cycles) and "overreporting" (e.g., requiring data collection and reporting each year). There are pros and cons to both approaches. On the one hand, given the importance of the Standards concepts, we might want to require fairly frequent assessments of performance on the Standards. For example, an annual assessment would allow for virtually continual monitoring of procedures, practices, and documentation. Additionally, if the full CRS is used, annual Procedural Standards data collection could provide a rich additional data base for use in supportive evaluation.

On the other hand, it may be neither desirable nor necessary to require annual data collection. As illustrated by the pretest, the Procedural Standards process requires a fair amount of effort. (Recall that the CRS alone required almost 44% of all staff time devoted to pretesting both the Performance Standards and the Procedural Standards). The overall level of effort required will presumably decrease after implementation, since reviewer efficiency should increase with case review practice and familiarity with the instruments. However, the Procedural Standards will probably always require relatively high levels of effort, regardless of who collects the data (states or the feds) or how experienced the data collectors are. Put simply, it is time consuming to conduct the comprehensive case reviews required by Procedural Standards; particularly given the need to sample sufficient cases, so as to allow for valid data analysis. The benefits obtained may be outweighed by the costs of requiring an annual review.

Further, and perhaps more important, it simply may not be necessary to require annual data collection. Recall that the basic focus of the Procedural Standards is on casework procedures, practices, and documentation related to compliance and quality service. Most likely, these aspects of state agency operation do not change radically from year to year. Given this, the need for continual (i.e., annual) assessment disappears. However, this does not mean that a lengthy assessment cycle (e.g., every ten years) is acceptable either. We still wish to conduct fairly regular assessments, so as to encourage compliance, data accuracy, and attention to timely case handling.

The solution, obviously, is to require assessment on the Procedural Standards over a regular, but medium-term reporting cycle. We feel that a three-year data collection cycle would be ideal, and that no more than four years should be allowed to elapse between assessments. Of course, we are speaking here of statewide assessments (i.e., data collection and reporting for a sample of the state's total caseload, large enough to allow data analysis). Spot-check assessments can (and should) be conducted more frequently, to monitor "problem" case workers and inexperienced caseworkers, and to monitor implementation of new procedures, practices, and methods of documentation. Such spot checks are most appropriately conducted by the state agencies, regardless of who bears responsibility for the statewide data collection. Further, agencies should be free to use whatever method of review they deem acceptable: the review method's effectiveness will be proven or disproven by the results of the succeeding statewide assessment.

Additionally, we would note that statewide assessments need not occur for all agencies in the same year. Rather, assessment could occur for one-third of the agencies each year, on a rotating basis.

Finally, we would suggest that the "reality checks," recommended as a supplement to the R-300 Verification procedure, be scheduled to occur in the same year statewide assessment (or as close to the assessment year as possible), so as to maximize the "interpretability" of data results. However, this may not be essential since -- as with practices and procedures -- the overall level of correspondence to "reality" is not likely to change dramatically from year to year.

To summarize, we recommend that statewide assessments occur at least every three years, and no less frequently than every four years. These statewide assessments should be supplemented by more frequent, targeted spot checks, as suggested by the statewide assessments. Finally, ideally the R-300 reality checks will in the same years as the statewide assessments.

Reviewer Qualifications and Experience

The Procedural Standards rest squarely on the process of case review. The quality of those reviews, and their resulting data, is strongly influenced by the capabilities of the people who conduct the reviews. As such, we want to utilize those personnel who are most qualified to review cases. Rather than attempt to identify the existing staff roles, within agencies or RSA, which might supply the most appropriate reviewer personnel, we will instead identify the qualities we would look for in reviewers. Each of the qualifications, noted below, are suggested in response to problems noted during the pretest. We would note also that our suggestions may seem, in total, like a "wish list" for the "super reviewer." Potentially, it may not be possible to find all the desired qualities in combination. However, to the extent we can, the review process will be made more efficient, valid, and reliable. We see the need for reviewers to satisfying four broad criteria; ideally, in combination:

- The most important quality desired in a reviewer is that he/she have an intimate familiarity with a wide variety of aspects of state agency operations. Each of three Procedural Standards data collection instruments requires that reviewers possess detailed understanding of such aspects of operation as:
    - casefile organization;
    - data collection forms and other documents maintained in case files (e.g., R-300 equivalent, vouchers, examination results, IWRP's, etc.);
    - inter-agency arrangements for service provision, and inter-agency divisions of responsibility for data collection and documentation;
    - agency policies regarding documents which are necessary and/or sufficient to establish compliance, accuracy, etc.;
    - general agency "standard operating procedures" regarding client service flow, decision mechanisms, review procedures, and so forth;
    - specific agency policies regarding target groups and other priority-related concerns, as consistent with federal law;
    - services available for use by the agency, inadequacies in overall service availability, and the impact of service availability on service progress and quality; and

- agency terminology, vis-a-vis federal (e.g., CRS) terminology.

In short, the ideal reviewer would have sufficient experience with, and/or knowledge of the particular agency, such that problems resulting from agency idiosyncrasies (policies, etc.) can be avoided during data collection.

- In addition to having familiarity with the particular agency's overall operations, ideally case reviewers would have experience in casework (i.e., counseling), casework supervision, and overall operations and administration. Such experience will be valuable in terms of providing familiarity with procedures, documents, and decision mechanisms. But more important, it provides the practical understanding required of reviewers when they are called upon to make subjective judgements regarding the appropriateness of services provided, case progress, counselor decisions, and so forth. Such subjective judgements are easier to make -- and are probably more valid and reliable -- when the reviewer can fall back on his/her own casework experience, coupled with his/her awareness of broad agency goals and the organizational and resource constraints faced by counselors.

- The third quality we would look for is that of "aloofness": the reviewer should have no conflict of interest when reviewing cases.

- Finally, our last criterion has less to do with the personal qualifications of reviewers than with the way we would like to see the reviewer position structured. Specifically, we ideally would make the reviewing function one of the reviewers' main assigned responsibilities. In other words, do not shift the reviewing task to different personnel with each data collection cycle. The benefits of this are several. First, to the extent that Procedural Standards data collection is part of the person's overall duties, we should be able to minimize perceptions that the Procedural Standards are intruding on the person's other regular duties. Further, by assigning the review function to particular individuals, we will reinforce the person's familiarity with the task, improve his or her reviewing ability, and remove the necessity for intensive training with each new data collection cycle.

Reviewer Training

To a great extent, the need for training should be minimized over time, provided that reviewers possess the qualifications and experience of the types discussed above. However, there will still be need for training of some sort, prior to each data collection activity, so as to assure maximum preparedness. This training should cover two basic sets of issues. First, prior to any data collection, the reviewers need to be reminded of the various idiosyncrasies of the particular agency which might cause problems in interpretation during the data collection. Most of these points will have been identified in earlier assessment cycles; thus what is needed is to simply remind the reviewers of the various points. Also, to the extent that new procedures or documentations have been implemented since the last cycle, the reviewers should be made aware of these changes.

The second major activity which must occur during training is the set of procedures which are designed to assure maximum data validity. Specifically, the consist of:

- conducting reviews on "reliability cases" (cases reviewed by all data collectors) prior to initiation of the actual data collection procedure;
- computing the consistency ratios for each of the data items collected on these reliability cases;
- having reviewers discuss these cases, both in terms of the overall picture of the cases which emerged from the reviews, and in terms of specific variables which proved difficult to assess reliably;
- arriving at consistent decision-rules for dealing with ambiguous or problematic case circumstances; and
- documenting these decisions and rules, to allow other parties (e.g. RSA) to interpret data results.

By conducting these two broad training activites at each data collection cycle we should be able to increase reviewers' preparedness, and decrease consistency and subjectivity problems to the greatest extent possible. Again, the benefits of these activities should be maximized provided that our reviewers meet the qualifications outlined earlier.

Conducting the Data Collection

We would like to point out three separate issues which will impact on the efficiency and intensiveness of the data collection process, and on the utility of data collected. These issues pertain to:

- the conduct and ordering of the review process for individual cases;
- the sampling procedures for choosing cases for review; and
- the physical location for conducting review activities.

First, as regards the conduct of the review process we feel that the same reviewer should collect all Procedural Standards data for any of his or her assigned cases. That is, responsibility should not be split among different reviewers, for collecting the R-300 Verification, CRS, and Timeliness Assessment data. In our opinion, those three data collection instruments complement each other in terms of the information they elicit, and in terms of the understanding of the circumstances of the case which results when only one reviewer collects all the information required on the case. We would thus recommend that one reviewer conduct the full data collection process for any given case, and that the review process be conducted in the following order:

1) R-300 Verification
2) CRS (or MCRS)
3) Timeliness Assessment.

As noted earlier, by following this order the reviewer is forced to digest as much "objective" background information as possible, and should have an understanding of the case which is exceeded only by the counselor and possibly by the relevant counselor supervisor. This level of objective knowledge and understanding can only help the reviewer in making the required "subjective" judgements, particularly as relate to Timeliness Assessments.

Another important issue concerns the sampling procedures to be used in selecting cases for review. This issue is related to two practical concerns: (1) we must ensure that, for each of the Procedural Standards issues, a sufficient number of cases have been reviewed to allow for analysis and interpretation of the data; and (2) we would prefer that, to the extent possible, reviews be conducted on clients who are in service so as to assess current operations and to allow for intervention on behalf of current in service cases, where problems seem to exist.

The first issue arises directly out of our experience during the pre-test. Specifically, we were unable to assess performance on those CRS data items related to extended evaluation cases, and to cases closed ineligible. These problems arose because: (1) the MEU's specifically decided to exclude 08's from their samples; and (2) no provision was made for ensuring a sufficient sample of cases who had been placed in extended evaluation. Closure status was the criterion for sampling and selection; it was only coincidental that some of these cases had gone through extended evaluation. These problems can be corrected simply by incorporating an additional element to the sampling frame: specifically, by including the variable "entered/did not enter extended evaluation" as one of the sampling criterion, and by selecting a sufficient number of cases which did enter. Likewise, future data collection efforts must include 08's, in sufficient numbers to allow assessment of compliance with the regulations pertaining to ineligibility determinations.

The second issue relates to the overall utility of the Procedural Standards, for managing current agency operations. Specifically, reviewers noted that, since the sample included only closed cases, there was no possibility for intervening to correct any problems which may exist for cases currently in service. We feel that this issue can be resolved fairly simply. The fact is that each of the data collection instruments -- and particularly the CRS -- lend themselves to "segmental auditing." That is, the instruments are structured in such a way as to allow assessment of fairly discrete stages of the overall service process: for example, the CRS contains separate sections on eligibility determination, extended evaluation, plan development, service provision, and closure. There is no reason why the sampling frame cannot include cases which currently fall into each of these points of the service process. Thus, we should target such cases, while still ensuring sufficient numbers of closed cases for analysis of closure issues.

The last point concerning conduct of the data collection relates to the physical location of the data collection effort. Logistically, it is preferable to centralize the data collection activity in one place (e.g., the state's central offices). However, it was noted during the pretest that requiring removal of case files from their "home base" (e.g., a district office) was problematic in cases where the files were needed at the home base. This problem would be exacerbated if the sampling is adjusted to include in-service statuses. We do not have a specific recommended solution to this problem. We would simply note that the issue should be considered, and resolved as appropriate in the particular state. Perhaps the reviewers could travel to districts to conduct reviews, if they can do it without incurring excessive travel or other costs.

Inter-Agency Responsibilities for Data Collection and Reporting; and Advance Work Needed Prior to Data Collection Cycles

Thus far we have addressed issues of a general nature pertaining to discrete aspects of the Procedural Standards system. At this point we wish to discuss how these aspects would be brought together, depending on where we place responsibility for data collection and reporting. Specifically, we ask: how should the system work if state agencies are responsible, and how would it work if RSA is responsible? Ultimately, the decision of where to place responsibility must be made by RSA and the states; we cannot make that decision. However, in what follows, we will present our understanding of the pros and cons associated with different responsibility structures, and will draw out the implications of the earlier discussions as they relate to location of responsibility.

Locating Responsibility with State Agencies

Placing responsibility for data collection and reporting on the various state agencies has some potential benefits. These include:

- Reviewers at the state level are closer to the system under review. They would have a prior, and better understanding of state policies, the agency itself, and any peculiarities of the state that must be taken into account when assessing performance on the Procedural Standards.

- The greater proximity of state agency personnel to the system under review increases the chances for constructive feedback and improvement, in a shorter period of time.

But placing responsibility at the state level can also have some drawbacks. These drawbacks include:

- The possibility that many state agencies will not have the available manpower to conduct a thorough case review. As noted earlier, given the training and time requirements, we would prefer that the review function be made a regular duty of whoever is chosen to conduct case reviews. However, agencies may not be able to support such a staff role.
- Also, there is the problem of partiality (i.e., conflict of interest) if responsibility for case review is placed too low within the state organization. If the review team is made up of counselors, counselor supervisors, or even district administrators, the review team might end up investigating itself: that is, any perverse findings might reflect back to the review team. This could certainly discourage a thorough audit.

If the first problem can be resolved (i.e., states can support personnel in a case review role), then the second problem might be overcome by placing reviewers within the evaluation section of the agency administration (or alternatively, by assigning the review function to current staff in the evaluation division). As members of the agency's central administration, such personnel should be able to avoid conflict of interest.

If states have responsibility for data collection, we strongly recommend that the Modified Case Review be used, rather than the full Case Review, so as to minimize effort required. Further, for those states already possessing a case review process, we feel it would be acceptable for them to use their own instrument and process, and then transfer the information to the standardized Procedural Standards instruments. However, the state's process must provide all the information required for the Procedural Standards, and the state must demonstrate to RSA that this is the case. To the extent that required information is missing, the state's process must be modified.

The last design issue concerns the advance work needed to identify and account for state agency idiosyncrasies. We feel that it is the state's responsibility to educate RSA about the various unique aspects of its operations, so that RSA can have a context for interpreting data results. Basically, we feel that RSA and the states should together review the data requirements of the Procedural Standards instruments, and that the state should point out where its unique aspects could cause problems for data collection and reporting. In this process, it will be the duty of the state to demonstrate how interpretation should occur on the problematic questions. We suggest that states develop a "handbook" which documents these problems, so that RSA can interpret the results and use the results in comparing states. This handbook could be updated to reflect changes in circumstances, and should be used as a tool during the pre-data collection training session. In this way, we allow maximum flexibility to states, while satisfying RSA's information needs.

Locating Responsibility with RSA

If RSA is assigned responsibility for data collection and reporting, the logical place to put this responsibility is with the regional office. Within RSA, the regional offices will most likely possess the best level of knowledge regarding operations within their relevant states. As with state agencies, there are pros and cons to placing responsibility with RSA regional offices. The benefits are discussed below.

- Perhaps the greatest benefit resulting from having RSA responsible is that by doing so, we position the concern for monitoring compliance within the RSA structure, rather than depending on states to assume responsibility for this activity. This is appropriate inasmuch as the Standards address RSA concerns, and since they will be imposed by RSA.
- By placing responsibility with RSA regional offices, we should reduce the number of people involved in review, and reduce the overall cost involved in Procedural Standards data collection. In fact, the nature and requirements of the review function lend themselves somewhat more to placement within RSA rather than within states. For

example, it makes some sense to place responsibility with RSA, since the statewide assessments would occur only every three years, in a given state. Given this, RSA can maintain an on-going review team (whose responsibilities may or may not include duties other than data collection for the Procedural Standards), more easily than could states. The team would then rotate among the states in the region, as the time arrived for a statewide assessment. This arrangement would have the effect of:

- minimizing the training and retraining required;
- increasing the consistency and reliability of the data base;
- increasing across-state comparability of data; and
- reducing the cost to the states and to RSA.

- An additional benefit resulting from RSA assuming responsibility is that, as RSA staff, the reviewers should possess the best understanding of compliance issues possible. However, for the Procedural Standards process to be as useful as possible, the reviewers should ideally also possess the other qualities, noted earlier, as desirable for personnel conducting the review. These include:
  - an understanding of practical casework procedures and "best practice"; and
  - an understanding of unique aspects of state operation.

  In other words, should RSA be assigned responsibility, the people we chose as reviewers should provide the "bridge" needed to be able to assess state performance vis-a-vis federal concerns, while at the same time performing that assessment within the context of the state's operations. Thus, the importance of the "handbook", discussed above, becomes clear.

- In a major sense, placing responsibility with RSA is appropriate in that it allows for identification of technical assistance needs by one of the major providers of technical assistance to the states. This argument is further strengthened by the fact that this strategy will ensure the availability of a more complete data base for supportive evaluation, particularly if regional offices continue to use the full CRS for case reviews. Even without using the full

CRS, RSA staff could use a combination of the Modified CRS (so as to assess performance on the Standards) with the supportive evaluation data items from the CRS.

- Presumably, by having RSA staff conduct the data collection, less partisanism will be shown on the part of data collectors, resulting in decreased scepticism of the data's validity.
- Finally, by having RSA assume responsibility, we should improve the overall receptivity of the states to the full standards system (i.e., Performance and Procedural Standards).

In terms of drawbacks, we see two major concerns.

- First, RSA reviewers might not be able to become familiar enough with the peculiarities of the various states under review, on a continuing basis. If this proves true, the findings of reviewers might be distorted or invalid. However, we feel that if our suggestions regarding reviewer qualifications, experience and training (e.g. the "handbook") are followed, this should not prove to be a major problem.
- Second, due to the bureaucratic "distance" between the states and RSA, we may experience unacceptable time lags between data collection, reporting, provision of technical assistance. However, any such problems would presumably be reduced as a result of working the "bugs" out of the system, after implementation.

X. CONCLUSION

The Vocational Rehabilitation Program Standards have now undergone three iterations of development. In an earlier chapter of this report, we discussed the process by which the current RSA VR Program Standards were developed, and we discussed the later developmental efforts which culminated in Berkeley Planning Associates' recommendations for a revised set of VR Program Standards. This revised set of standards has now undergone a field pretest in six Model Evaluation Unit (MEU) state agencies, resulting in a final set of recommended standards, data elements, and data collection procedures. This report presented detailed discussions on each of the standards, data elements, and data collection procedures, with respect to the following issues:

- the rationale for including the standard or data element in the overall evaluation system;
- the process for training and data collection required to conduct the pretest;
- the time investment required of MEUs to conduct the pretest;
- the analysis results for each data element, using the pretest data;
- the comments and reactions to the standards, data elements, and data collection forms, obtained from RSA reviewers, the MEUs, and other state agency reviewers; and
- our responses to those comments.

Throughout the pretest, BPA has attempted to weigh the pros and cons relevant to each of the standards, data elements, and data collection instruments, in terms of their utility in furthering RSA's broad evaluation and program management aims, their methodological and conceptual soundness, and their feasibility for implementation. Out of this process has come our final recommendations for the various components (i.e., standards, data elements, and data collection procedures) which will comprise the total VR Program Standards System. These recommendations are summarized below.

Table 55

Recommendations for Program Performance Standards

Standards	Recommendations
1. VR shall serve the maximum proportion of the potentially eligible target population, subject to the level of federal program funding and priorities among clients.	Retain as is.
2. The VR program shall use resources in a cost-effective manner and show a positive return to society of investment in vocational rehabilitation of disabled clients.	Retain as is.
3. VR shall maximize the number and proportion of clients accepted for services who are successfully rehabilitated, subject to the meeting of other standards.	Retain as is.
4. Rehabilitated clients shall evidence increased economic independence.	Modify: delete the word "increased."
5. There shall be maximum placement of rehabilitated clients into competitive employment. Non-competitive closures shall be in accordance with the IWRP goal and shall represent an improvement in gainful activity for the client.	Modify: delete "...shall be in accordance with the IWRP goal and..."
6. (Old) Vocational gains shall be attributable to VR services.	Eliminate from Performance Standards. Establish causality through periodic controlled research studies.
(New) Rehabilitated clients shall evidence vocational gains.	New standard.
7. Rehabilitated clients shall retain the benefits of VR services.	Retain as is.
8. Clients shall be satisfied with the VR program, and rehabilitated clients shall appraise VR services as useful in achieving and maintaining their vocational objectives.	Retain as is.

As well, this report presented a summary and a working example of our proposed model for using standards information to identify problems in state agency performance. With such a system for using program data to support program management and decisionmaking, the standards will more effectively serve their original function: to assist RSA and state agencies in directing the VR program towards improved performance.

SUMMARY OF RECOMMENDATIONS FOR THE PERFORMANCE STANDARDS

Using the pretest data results, and after considering the comments we received from the MEUs (both before and during the pretest) and from other reviewers, we have developed a revised set of recommended Program Performance Standards and data elements. Our primary concerns have been that any standard or data element recommended for inclusion in the final set meet the following kinds of criteria:

- Standards must address, and data elements must measure, achievement of a valid VR program goal.
- The VR program must be capable of influencing performance toward the goals addressed/measured by the standards and data elements.
- Any data element recommended for inclusion should be non-redundant with other data elements; should allow for assessment of a given state's performance independently of other states' performances (i.e., no "closed systems"); and should have a straightforward interpretation in terms of "good" and "bad" performance.

The recommended sets of revised standards and data elements appear in Tables 55 and 56. As shown in Table 55, we recommend that five of the eight originally-proposed Performance Standards be retained in their current form. Of the other three standards, two should be modified slightly. We suggest that Standard 4 be modified by deleting the work "increased," inasmuch as we feel VR's responsibility is merely to facilitate client achievement of a minimum acceptable level of economic independence. While we applaud any program success in facilitating clients' achievement of even greater levels of economic independence, it would be unreasonable to require more than the minimum income needed for an acceptable level of economic independence.

Standard 5 should be modified by deleting the phrase "shall be in accordance with the IWRP goal." This modification should remove any incentive to "settle" for non-competitive outcomes, even if a non-competitive goal was seen, at the plan development stage, as the best a particular client could hope for.

We recommend that the "causality" standard (Standard 6) be eliminated from the Performance Standards. While it is important from an evaluation standpoint to establish a causal relationship between VR services and observed benefits, a valid methodology for doing so has yet to be developed. We recommend that causality be established through controlled research studies, occurring less frequently (e.g., every third year) than the basic annual standards report.

Finally, in the place of the causality standard, we recommend a new Standard 6, mandating that "rehabilitated shall evidence vocational gains." Thus we retain a concern for documenting positive client change, while removing the requirement to "prove" VR's role as the primary change-agent.

With these modifications, we feel that the revised system of Performance Standards captures the broad concerns for evaluating the VR program's achievement of coverage, impact, and efficiency. The same kind of thinking process occurred in considering which of the data elements -- the discrete measures of goal achievement -- should remain in the revised standards system. As Table 56 shows, we recommend that 11 of the original data elements be retained in their current form. We feel that four of the data elements (or components of data elements) should be eliminated completely from the standards, for the following types of reasons:

- The data element represents a closed system. This is the case for data element 1(i).
- The data element implies a goal which is either too stringent (i.e., goes beyond what is reasonable to expect from VR), or which is inappropriate as a performance indicator. This is the case for data elements 4(iv), and for the "satisfaction with present situation" item in 8(ii).
- The data element rests on unacceptable methodology, as with 6(i).

Table 56

Revised Recommendations for Program Performance Standards Data Elements, August 19, 1981

Data Elements		Recommendations
Standard 1: Coverage		
(i)	Comparison of caseload served to expenditures	Eliminate from Standard. Retain as information item in reporting system.
(ii)	Clients served per 100,000 population	Retain as is.
(iii)	Percent severely disabled	New data element.
Standard 2: Cost-Effectiveness and Benefit-Cost		
(i)	Expenditure per competitively employed closure	Retain as is.
(ii)	Expenditure per 26 closure	Retain as is.
(iii)	Ratio of total VR benefits to total VR costs (benefit cost ratio)	Retain as is.
(iv)	Total net benefit from VR services (discounted net present value)	Retain as is.
Standard 3: Rehabilitation Rate		
(i)	Percent 26 closures	Retain as is.
(ii)	Annual change in number of 26 closures	New data element.
Standard 4: Economic Independence		
(i)	Percent 26 closures with weekly earnings at/above federal minimum wage	Retain as is.
(ii)	Comparison of earnings of competitively employed 26 closures to earnings of employees in state	Retain as is.
(iii)	Comparison of earnings before and after VR services	[illegible] and move to Standard 6
(iv)	Comparison of 26 closures with public assistance as primary source of support before and after VR services	Eliminate
Standard 5: Competitive Employment		
(i)	Percent 26 closures competitively employed	Retain as is.
(ii)	Percent 26 closures with hourly earnings at/above federal minimum wage	Add "competitively employed."
(iii)	Percent 26 closures with competitive outcome or with non-competitive outcome and non-competitive goal	Move to Procedural Standards
(iv)	Percent non-competitively employed 26 closures showing improvement in gainful activity	Modify definition of "non-vocational improvement," using client-oriented F.A.I. and L.S.I. measures.
Standard 6: Causality (original Standard 6)		
(i)	Comparison of earnings change from referral to closure of 26 closures to earnings change of a control group	Eliminate

Table 56 (cont.)

Data Elements	Recommendations
Standard 6: Client Change (new Standard 6)	
(i) Average pre-post VR service earnings change for 26 closures	New data element. Modification of 4(iii).
(ii) In addition, changes in statuses and functional ability, when such measures become available	Data elements to be developed.
Standard 7: Retention of Benefits	
(i) Percent 26 closures retaining earnings at follow-up	Retain as is until SSA data links established annually.
(ii) Comparison of 26 closures with public assistance as primary source of support at closure and at follow-up	Collect income estimates from all sources of support, and ascertain if >51% is PA. Done at closure and follow-up
(iii) Percent non-competitively employed 26 closures retaining closure skills at follow-up	Modify definition of "non-vocational improvement" using the same client-oriented F.A.I. and L.S.I. measures as in 5(iv).
Standard 8: Client Satisfaction and Utility Appraisal	
(i) Percent closed clients satisfied with overall VR experience	Retain as is.
(ii) Percent closed clients satisfied with: present situation information provided counselor promptness physical restoration job training services placement services	- Eliminate "satisfied with present situation." - Combine counselor satisfaction items. - Retain service satisfaction items.
(iii) Percent 26 closures judging services received to have been useful in obtaining their job/homemaker situation	Combine with 8(iv) in new 8(iii).
(iv) Percent 26 closures judging services received to be useful in current performance on the job/homemaker situation	Combine with 8(iii) in new 8(iii).

In one case -- for data element 1(i) -- we suggest that the data be available in the reporting system for RSA's use, but not used for purposes of evaluating state agency performance.

In addition to the data elements completely eliminated from the standards system, we suggest that data element 5(iii) be moved from the Performance to the Procedural Standards. This is in keeping with the modification of the wording of Standard 5. The program should maintain its concern for good planning for services and outcomes, but such a concern is not appropriate as a performance evaluation measure. Also, we wish to avoid any incentives to settle for non-competitive outcomes in those cases where perceived potential "goes up" (i.e., points to competitive employment) during the service process. Recasting the issue as a Procedural Standard should resolve these problems.

We suggest that modifications be made to eight of the data elements. We recommend modifying the form of data element 4(iii) and moving it to the new Standard 6, measuring client gains. The original data element measures the total percentage change in client earnings, pre- versus post-VR. In its modified form, the data element measures the average raw dollar change in client earnings.

We recommend a change in the computation of data element 5(ii), to include only competitively-employed rehabilitants in the calculation. This focuses the data element more clearly as a measure of gainful employment -- and quality of employment -- among competitively-employed closures.

Two of the modified data elements -- 5(ii) and 7(iii) -- pertain specifically to non-competitively-employed rehabilitants. In both cases, we recommend deferring data collection until after the conclusion of the upcoming pretest of the Functional Assessment Inventory (FAI)/Life Status Indicators (LSI). This pretest will determine the FAI and LSI measures to be included in the MIS design, and we recommend that the standards use the same measures to assess gains for non-competitively-employed closures as are chosen for the MIS. This strengthens the link between the standards and the MIS, and avoids proliferation and overlapping of data elements. To implement data element 5(iv), the FAI/LSI measures must be included on the R-300 (in both the section completed at acceptance and the section completed at closure). To implement 7(iii), the FAI/LSI items, used to produce the relevant measures, must be reformatted to allow for self-administration via the Follow-up Survey.

The remaining modified data elements pertain to all 26 closures. We suggest that the definition of "primary source of support" in data element 7(ii) be changed such that (1) the meaning of "primary" becomes intuitively clearer, and (2) that the focus becomes one of public versus private sources of support. The remaining modifications all concern the satisfaction issue (Standard 8). The service satisfaction items in data element 8(ii) should remain separate. However, analysis of the counselor satisfaction items (data element 8(ii)) and service utility items (8(iii) and (iv)) suggest that these two issues could be adequately addressed by combining the original five questions into one question on satisfaction with counselor and one question on service utility. These suggestions are reflected in our revised questionnaires.

In addition, we recommend adding two new data elements, modifying various data elements, for which data are immediately available. In both cases, the additions are recommended so as to more completely reflect the goals implied by the wording of the standards. Thus, for example, a "percent severe" statistic should be included as a data element in Standard 1, to reflect the phrase "subject to ... priorities among clients." As well, we suggest adding a data element to Standard 3 which measures annual change in the number of 26 closures, to reflect the phrase "maximize the ... number ... of clients ... rehabilitated."

Finally, we recommend including a new data element in the client change standard, addressing the gains of non-competitively-employed rehabilitants. Like data elements 5(ii) and 7(iii), this data element is contingent on further development of functional and status measures.

The recommendations detailed above are reflected in our recommended changes to the data collection instruments. The R-300 will require some additional information. However, it will, by the same token, become the primary source of client-level data for the Performance Standards. The Closure Survey will be used solely to address the satisfaction standard, and has been reduced from 26 to 6 questions, total. This should greatly reduce the costs of administering the Closure Survey, and should increase overall response rate. Likewise, the Follow-up Survey has been reduced from 26 to 6 questions, and will be used solely to address issues regarding retention of benefits.

The changes described above round out our recommended revisions to the Performance Standards and data elements, and to their corresponding data collection instruments. We feel that, with these revisions, the standards comprise a set of goal statements and evaluation indicators which is comprehensive, appropriate to VR goals, and conceptually and methodologically sound.

SUMMARY OF RECOMMENDATIONS FOR THE PROCEDURAL STANDARDS

We feel that the Procedural Standards and their associated data elements adequately and accurately address RSA's concerns for data quality, service timeliness, and compliance with the legislation. As such, we recommend that the Procedural Standards and their associated data elements all be retained in the revised VR Program Standards system. In addition, as discussed earlier, we recommend moving the originally-proposed Performance Standards data element 5(iii) (goal-occupation match) to the Procedural Standards.

The major issues with the Procedural Standards concern the process by which the standards are implemented. Table 57 summarizes those recommendations. We recommend that Procedural Standards data collection occur in a given state only once every three years.

We have recommended a wide range of qualifications to look for when selecting reviewers, and we have noted three specific issues with regard to data collection (e.g., ordering of review, sampling, and training of reviewers). Finally, in the previous chapter, we presented the pros and cons associated with placement of responsibility for data collection with the states, versus with RSA. We feel that, with careful consideration of these issues by RSA and the states, and subsequent implementation based on this consideration, the Procedural Standards will have their desired impact on the VR system in terms of

- encouraging compliance with the legislation; and
- improving the quality of VR services and their cost-effectiveness.

Table 57

Recommendations for the Procedural Standards

1. Retain the standards on R-300 validity, eligibility decisions, IWRP provision, and service timeliness.
2. Retain all data elements relevant to the above standards.
3. Add a new standard on goal planning (former data element 5(iii)).
4. Conduct statewide procedural standards data collection every three years.
5. Retain the data collection instruments as pretested, with the following qualifications:
    - -- if states conduct the data collection, have them use the Modified Case Review (a shorter version of the basic Case Review Schedule);
    - -- add an item to the Timeliness Assessment to identify cases handled with "undue speed."
    - -- conduct special validity checks of key R-300 items, if desired, in the same year as the Procedural Standards data collection activity;
6. Seek reviewers with the following qualifications:
    - -- familiarity with unique features of state operations;
    - -- experience in case work and administration;
    - -- no conflict of interest.
7. Attempt to maintain continuity of reviewer personnel.
8. Conduct a comprehensive reliability assurance procedure at the start of each new data collection effort in a state agency.
9. Assign the full Procedural Standards data collection, for any given case, to only one reviewer, to ensure familiarity with the circumstances of the case.
10. Conduct the review in the following order:
    1. R-300 Validity
    2. Case Review Schedule
    3. Timeliness Assessment
11. Sample a sufficient number of 06 participants and 08 closures, so as to allow analysis of the Procedural Standards issues relevant to these groups.
12. Sample a sufficient number of in-service clients to allow analysis of current case practices.

APPENDICES

1. Identified Agency Concerns from the R-300 Validity Pretest

2. Case Review Schedule Developed by San Diego State University RCEP IX.

APPENDIX 1

IDENTIFIED AGENCY CONCERNS FROM THE R-300 VALIDITY PRETEST

The R-300 Verification procedure revealed to the agencies a wide variety of concerns with their case record systems. Many of these problems could be categorized as inaccurate, inconsistent or inadequate recording of case information. The remainder were unique problems arising in individual states. These comments were taken from the Participant Evaluation and Comment Forms #2.

DELAWARE

Differences between districts.

Lack of compliance in some areas of case documentation.

Need to streamline case recording.

Basic skills needed by counselors and other classes of service delivery personnel.

Disability codes not necessarily placed in correct order (primary vs. secondary) on IWRP and R-300 data (DVR 313).

MICHIGAN

As long as some validating was being done, I felt we should do validation of entire R-300 -- if it would be of any use. And, if it is of no use, why are recording it in its entirety?

Need for updating of recorded information as circumstances change.

I feel we should be checking the disabilities closer and the severities before submitting the 300 documents.

Things are done in a careless manner. Workers have the feeling no one checks; all they want is for all the blanks to be filled in. I am much more aware of the need for casework documentation, rather than picking the information from material not in the case file.

The number of questions posed for clarification purposes by these reviewers (even those working with these forms on a daily basis). Does this confusion exist district-wide? Any way for improving the R-300 series so that it is more clear?

Various items on the forms are open to different interpretation.

I don't see any concerns about the 300 system. The few mistakes could have been overlooked. As far as reporting data, I feel the 300 system is sufficient.

MISSISSIPPI	Determing the specific problems that happen among counselors as relating to casework and documentation; recommendations to improve the quality of casework.
	Poor IWRP; inadequate case recording; clients not advised of confidentiality of info; no certificate of ineligibility for statuses 28 and 30.
	Lack of order in case folder filing.
	Failure to answer "all" questions on R-300 and R4.
OREGON	Inconsistent coding of benefits (SSDI, SSI, PA).
	Unsubstantiated coding of severe disability.
	Obvious failures to pursue doctors' recommendations.
	Apparent misapplication of eligibility criteria on mentally ill cases.
	Inappropriate eligibility determination.
	Inappropriate SD determination.
	Inadequate narratives.
	Inconsistent filing/record keeping procedures.
	SD coding inaccuracy.
	Failure of counselors to follow through with "thorough diagnostic assessment" and/or to follow recommendations of medical consultants.
	The acceptance of cases who are borderline eligible or even clearly not eligible.
	Medical consultation sometimes sloppily recorded -- omit to indicate whether severe or not.
	Documentation of R-114 medical consultant judgments sometimes skimpy or even seems to contradict consultant's judgment.
	Sometimes seems to be little evidence of direct counselor-client contact.
	Sometimes inadequate follow-up to find why client is not responding before closing unrehabilitated.
PENNSYLVANIA	Uniformity of judgments.
	Validation of computer runs (e.g., months in status).
	Consistencey of coding of SD and major disabling conditions.
	Need for simplicity of verification for SSI and SSDI programs.
	Need to standardize procedures.
	Need to lighten burden on counselors.

PENNSYLVANIA (cont.)

Agency may be penalized or negatively rated because certain paperwork aspects are not employed in the case process and yet the info may be inferred or interpreted from other case data. In our use, the info "makes sense" but may not be considered "uniform" for a third party.

I think the areas of concern were in Trust Fund, Supplemental Security Fund and SD check-offs because many questions were brought up about these during the review.

Correct posting of funds expended; better training in completing a 104 more thoroughly; more specificity in declaring severely disabled and rationale.

Accuracy of the input documentation.

Indicates that some problems exist in respect to interpretation of some aspects of casework.

Uniformity.

Too cumbersome.

Collection of useless data or data not directly connected to proving eligibility and the provision of VR services to achieve SGA for the client.

Most of the discrepancies noted were minor and did not affect federal cost participation in Special Programs.

Concern about counselor judgment.

Concern about training.

Concern about who is extracting information for reporting.

APPENDIX 2

CASE REVIEW SCHEDULE DEVELOPED BY SAN DIEGO STATE UNIVERSITY RCEP IX

The following data items are used for the Procedural Standards:

Standard 10: Eligibility

Section II.A.: 4-11
Section II.B.: 14, 19, 33, 40, 42a, 42d
Section III: 1c, 3, 7, 8
Section Vii: 2, 5, 6a, 6c, 7, 8, 9, 10a, 10d, 11, 12, 13a, 13c, 14, 17a, 17c, 18, 20, 21, 23, 24, 25, 28a, 28c, 34, 35, 36, 37a, 37b, 38, 39

Standard 12: IWRP

Section II.B.: 18, 19, 20a, 20b, 21a, 21b, 21d, 21e, 22, 23, 26, 28-39, 42a, 42b, 42c, 42d, 43-54B, 43, 54C
Section V: 1, 2, 3a, 3b, 4a, 4b, 5, 6, 9, 11-23, 24a, 24b, 24c, 24d, 25a, 26
Section VI: 1-14B, 1-14C
Section VII: 20, 22, 34

Case Review Schedule

Prepared by

Lana C. Brenes, M.S.
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RCEP IX
Rehabilitation Counselor Program
San Diego State University

Revised March, 1978

Special Research Revision
September, 1978
In conjunction with
Berkeley Planning Associates

CASE REVIEW SCHEDULE

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INSTRUCTIONS FOR SECTIONS I - VIII

To complete the questions in Section I through VIII, please follow these special instructions:

1. Read the directions at the top of each page and within each page, when provided.

2. Answer every question unless otherwise instructed (see Manual: Case Review Schedule Instructions.)

3. Mark the appropriate answer space to the right of the question.

4. Do not fill in more than one space for any single row. That is, give only one response to each question.

5. Use a soft lead pencil (No. 2 is ideal) and observe these important requirements:

   Make heavy black marks that fill the circle.
   Erase completely any answer you wish to change.
   Make no stray markings of any kind.

6. This schedule is designed for machine scoring of your responses. Questions are answered by marking the appropriate answer spaces as illustrated in this example:

	Ballpoint Pen	Black Lead Pencil	Other
Question - Which is the only marking instrument that will be read properly?	①	●	③
		↗ Correct Answer	

SECTION I: CASE INFORMATION A. CASE IDENTIFICATION	ANSWER (Write in Space Provided)

NOTE: IMPORTANT INSTRUCTIONS

For individuals who were previously clients, review only from date case most recently opened.

Answer all items using code numbers in square(s) provided. Refer to code sheets in manual for items noted with (code) and enter appropriate code on this page.

1. Reviewer Initials:	______
2. Reviewer: (1) State; (2) Federal; (3) Other (specify)______	☐
3. Reviewer: (1) Administrator; (2) Supervisor; (3) Counselor; (4) Other (specify)______	☐
4. Date of Review:	☐☐ ☐☐ ☐☐ YR MO DAY
5. State Agency (code)	☐☐
6. Case Number:	☐☐☐☐☐☐☐☐☐☐☐☐☐☐
7. Case Status:	☐☐

SECTION I: CASE INFORMATION
B: SIGNIFICANT DATA

8. Does the client's case reord contain a copy of the case service report R-300 or the equivalent state statistical reporting form?

ANSWER
YES NO
① ②

NOTE: IMPORTANT INSTRUCTIONS

Respond to all applicable items 9-19 using information gathered form the case record.

In the event the information is not found in the case record, use available data from the R-300 or its equivalent. If the data is not recorded (N/R) anywhere in the case file, fill in circle 5 in the far right column. If the data is not applicable (N/A) to the client, fill in circle 6 in the far right column.

If the case record contains an R-300 or equivalent form fill in a number following questions 9 and 16 in the column labeled "R-300 Verification" or the far right column indicating one of the following potential findings:

1 = Verified;	R-300 data included and consistent with that found in case record
2 = Not Verified;	R-300 data different from that found in case record
3 = Case Record Only;	Data recorded in case record only, not on R-300
4 = R-300 Only;	Data recorded on R-300 only, not in case record
5 = Not Recorded (N/R);	Data not recorded in either case record or R-300
6 = Not Applicable(N/A);	Data not applicable to client

		R-300 Verification					
		Verified	Not Verified	Case record only	R-300 Only	N/R	N/A
9. Date client was referred to State VR agency:	☐☐ YR. ☐☐ MO. ☐☐ DAY	①	②	③	④	⑤	⑥
10. Signed application date:	☐☐ YR. ☐☐ MO. ☐☐ DAY					⑤	
11. Date certified as accepted for extended evaluation:	☐☐ YR. ☐☐ MO. ☐☐ DAY					⑤	⑥
12. Date IWRP written and approved for extended evaluation:	☐☐ YR. ☐☐ MO. ☐☐ DAY					⑤	⑥

SECTION I: CASE INFORMATION
B. SIGNIFICANT DATA

			R-300 Verification				
			Verified	Not Verified	Case Record only	R-300 Only	N/R	N/A
13. Date certified as accepted for vocational rehabilitation services:	☐☐ YR. ☐☐ MO. ☐☐ DAY					⑤	⑥
14. Date initial IWRP written and approved:	☐☐ YR. ☐☐ MO. ☐☐ DAY					⑤	⑥
15. Date of initiation of VR services:	☐☐ YR. ☐☐ MO. ☐☐ DAY					⑤	⑥
16. Closure Date:	☐☐ YR. ☐☐ MO. ☐☐ DAY	①	②	③	④	⑤	⑥
17. Date IWRP amended and approved for post employment services:	☐☐ YR. ☐☐ MO. ☐☐ DAY					⑤	⑥
18. Date of initiation of post employment services:	☐☐ YR. ☐☐ MO. ☐☐ DAY					⑤	⑥
19. Date of termination of post employment services:	☐☐ YR. ☐☐ MO. ☐☐ DAY					⑤	⑥

NOTE: IMPORTANT INSTRUCTIONS

If the client's case file does not contain an R-300 or an equivalent form, proceed to section II, page4 to complete the section on evaluation of rehabilitation potential.

If the case file does contain an R-300 or its equivalent please respond to all items in Section I:C.

TION I: CASE INFORMATION

C. R-300 VERIFICATION

ANSWER COLUMN

NOTE: IMPORTANT INSTRUCTIONS

respond to the information items listed below (20-58) by filling in the number in the answer column which indicates your findings relative to the agreement of data found on the R-300 (or equivalent) to that found in the Case Record. The following is a delineation of potential responses and their definitions:

1 = Verified;	R-300 data included and consistent with that found in the case record
2 = Not Verified;	R-300 data different from that found in the case record
3 = Case Record Only;	Data recorded in case record only, not on R-300
4 = R-300 Only;	Data recorded on R-300 only, not in case record
5 = Not Recorded; (N/R)	Data not recorded in either case record or R-300
6 = Not Applicable; (N/A)	Data not applicable to client

		Verified	Not Verified	Case Record Only	R-300 Only	N/R	N/A
20.	The client's Social Security number	①	②	③	④	⑤	
21.	The client's SSDI status at referral	①	②	③	④	⑤	
22.	The client's SSI status at referral	①	②	③	④	⑤	
23.	The major (primary) disabling condition	①	②	③	④	⑤	
24.	The client's secondary disability	①	②	③	④	⑤	⑥
25.	The client's work status at referral	①	②	③	④	⑤	
26.	The client's earnings the week prior to referral	①	②	③	④	⑤	
27.	The clients receipt or non-receipt of public assistance at referral (Documentation of non-receipt would occur when the R-300 records no public assistance received and the case record provides no documentation of receipt.)	①	②	③	④		

TION I: CASE INFORMATION

C. R-300 VERIFICATION

ANSWER COLUMN

	Verified	Not Verified	Case Record Only	R-300 Only	N/R	N/A
8. The type(s) of public assistance received **at referral**						
a. SSDI	①	②	③	④	⑤	⑥
b. SSI-aged	①	②	③	④	⑤	⑥
c. SSI-blind	①	②	③	④	⑤	⑥
d. SSI-disabled	①	②	③	④	⑤	⑥
e. AFDC	①	②	③	④	⑤	⑥
f. Other (specify)____________________)	①	②	③	④	⑤	⑥
29. The monthly amount of public assistance received **at referral**	①	②	③	④	⑤	⑥
0. The length of time, prior to **referral**, during which the client received public assistance	①	②	③	④	⑤	⑥
1. The appropriateness of the Federal Special Program identification checks						
a. Social Security Trust Funds (TF)	①	②	③	④	⑤	⑥
b. Veterans (VET)	①	②	③	④	⑤	⑥
c. Migratory Agricultural Workers (MAW)	①	②	③	④	⑤	⑥
d. Offender (PO)	①	②	③	④	⑤	⑥
e. Work Incentive Program (WIN)	①	②	③	④	⑤	⑥
f. Expansion Grant Project (SEC4)	①	②	③	④	⑤	⑥
g. Supplemental Security Income Funds (SF)	①	②	③	④	⑤	⑥
h. Severely Disabled (SD)	①	②	③	④	⑤	⑥
2. The client's SSDI status **at closure**	①	②	③	④	⑤	
33. The client's SSI status **at closure**	①	②	③	④	⑤	

SECTION I: CASE INFORMATION

C. R-300 VERIFICATION

	ANSWER COLUMN					
	Verified	Not Verified	Case Record Only	R-300 Only	N/R	N/A
34. The client's work status at closure	①	②	③	④	⑤	
35. The client's weekly earnings at closure	①	②	③	④	⑤	
36. The client's receipt or non-receipt of public assistance at closure (Documentation of non-receipt would occur when the R-300 records no public assistance received and the case record provides no documentation of receipt.)	①	②	③	④	⑤	
37. The type(s) of public assistance received at closure						
a. SSDI	①	②	③	④	⑤	⑥
b. SSI-aged	①	②	③	④	⑤	⑥
c. SSI-blind	①	②	③	④	⑤	⑥
d. SSI-disabled	①	②	③	④	⑤	⑥
e. AFDC	①	②	③	④	⑤	⑥
f. Other (specify______________________________)	①	②	③	④	⑤	⑥
38. The monthly amount of public assistance received at closure	①	②	③	④	⑤	⑥
39. The client's occupation at closure	①	②	③	④	⑤	
40. The correct DOT code for that occupation? (Check in Dictionary of Occupational Titles)	①	②	③	④	⑤	
41. The client's outcome status	①	②	③	④	⑤	
42. Reason for nonrehabilitated closure	①	②	③	④	⑤	⑥
43. The total cost of all case services	①	②	③	④	⑤	⑥
44. The total cost of all case services provided in rehabilitation facilities	①	②	③	④	⑤	⑥
45. The total cost of case services charged to social security trust funds	①	②	③	④	⑤	⑥
46. The total cost of case services charged to supplemental security income funds	①	②	③	④	⑤	⑥

TION I: CASE INFORMATION

C. R-300 VERIFICATION

SERVICES PROVIDED

NSTRUCTIONS: Please answer the ollowing questions (A and B) for each of the service categories 47-52 listed at the right.

ITEM	47	48	49	50	51	52
SERVICE	Diagnostic & Evaluation	Restoration (Physical or Mental)	College or University	Other Academic Elementary or High School	Business School or College	Vocational School
. Indicate your findings regarding the agreement of data found on the R-300, or its equivalent, to that found in the case record relative to the client's receipt or non-receipt of the following services.						
Verified	①	①	①	①	①	①
Not Verified	②	②	②	②	②	②
Case Record Only	③	③	③	③	③	③
R-300 Only	④	④	④	④	④	④
N/R	⑤	⑤	⑤	⑤	⑤	⑤
N/A	⑥	⑥	⑥	⑥	⑥	⑥
. Indicate your findings regarding the agreement of data found on the R-300, or its equivalent, to that found in the case record relative to the cost status of the following services.						
Verified	①	①	①	①	①	①
Not Verified	②	②	②	②	②	②
Case Record Only	③	③	③	③	③	③
300 Only	④	④	④	④	④	④
N/R	⑤	⑤	⑤	⑤	⑤	⑤
N/A	⑥	⑥	⑥	⑥	⑥	⑥

SECTION I: CASE INFORMATION

C. R-300 VERIFICATION

SERVICES PROVIDED

INSTRUCTIONS: Please answer the following questions (A and B) for each of the service categories (53-58) listed at the right

SERVICE	53 On-the-job Training	54 Personal and Vocational Adjustment	55 Miscellaneous Training	56 Maintenance	57 Other Services	58 Services to Other Family Members
A. Indicate your findings regarding the agreement of data found on the R-300, or its equivalent, to that found in the case record relative to the client's receipt or non-receipt of the following services.						
Verified	①	①	①	①	①	①
Not Verified	②	②	②	②	②	②
Case Record Only	③	③	③	③	③	③
R-300 Only	④	④	④	④	④	④
N/R	⑤	⑤	⑤	⑤	⑤	⑤
N/A	⑥	⑥	⑥	⑥	⑥	⑥
B. Indicate your findings regarding the agreement of data found on the R-300 or its equivalent, to that found in the case record relative to the cost status of the following services.						
Verified	①	①	①	①	①	①
Not Verified	②	②	②	②	②	②
Case Record Only	③	③	③	③	③	③
R-300 Only	④	④	④	④	④	④
N/R	⑤	⑤	⑤	⑤	⑤	⑤
N/A	⑥	⑥	⑥	⑥	⑥	⑥

For questions 1 through 13, please answer with:

① = YES

② = NO

③ = NOT APPLICABLE (N/A)

ELIG.	IWRP	SUPP. EVAL.	SECTION II: EVALUATION OF REHABILITATION POTENTIAL A: PRELIMINARY DIAGNOSTIC STUDY - STATUS 02	ANSWER YES	 NO	 N/A
			Does the case record . . .			
			* 1. contain an application for VR services?	①	②	
			* 2. document that the client was adivsed of the confidentiality of all information pertaining to the client's case?	①	②	
			* 3. document that the client was advised of the need for the client's written consent for the release of information pertaining to the case?	①	②	③
			Does the preliminary diagnostic study . . .			
X			*# 4. include an appraisal of the current general health status of the client?	①	②	
X			*# 5. include a psychiatric or psychological examination in all cases of mental or emotional disorder?	①	②	③
			*# 6. include such examinations and diagnostic studies as necessary to:			
X			a. determine eligibility?	①	②	③
X			b. determine the need for extended evaluation?	①	②	③
X			* 7. place primary emphasis upon the determination of the client's potential for achieving a vocational goal?	①	②	
X			* 8. support the determination that the client has a medically recognized physical or mental disability?	①	②	
X			* 9. support the determination that the medically recognized disability constitutes a substantial handicap to employment for the client?	①	②	
X			* 10. support the determination that VR services may reasonably be expected to benefit the client in terms of employability?	①	②	③
X			* 11. support the determination that an extended evaluation is necessary to determine that VR services may reasonably be expected to benefit the client in terms of employability?	①	②	③
		(X)	* 12. contain data supporting a determination that the client is severely disabled?	①	②	③
			13. document the use of state agency consultation:			
			a. medical?	①	②	③
			b. psychiatric?	①	②	③
			c. psychological?	①	②	③

* Required for conformance with Regulations and Guidelines.

# May be discussed with medical consultant for clarification/interpretation.

SECTION II: EVALUATION OF REHABILITATION POTENTIAL
A. PRELIMINARY DIAGNOSTIC STUDY - STATUS 02

NOTE: IMPORTANT INSTRUCTIONS

If case is certified eligible for extended evaluation, go to Section IIB, question 14, page 6 to complete subsection on Extended Evaluation.

If case is certified eligible, go to Section III, question 1, page 13 to complete section on Eligibility.

If case data does not support the determination that the client is eligible, although the client is certified as such, set case aside for review by full review team.

If case is closed in Status 08, go to Section VII, page 23, to complete the appropriate subsection on Status 08 closures.

For items 14 through 42, please answer with:

① = YES
② = NO
③ = NOT APPLICABLE (N/A)

ELIG.	IWRP	SUPP. EVAL.	SECTION II: EVALUATION OF REHABILITATION POTENTIAL B. EXTENDED EVALUATION - STATUS 06	ANSWER		
				YES	NO	N/A
			Certification for Extended Evaluation *Does the case record . . .*			
X			* 14. contain a certification for extended evaluation to determine rehabilitation potential? *If YES, does the certification for extended evaluation . . .*	①	②	
			*a. indicate the date of certification?	①	②	
			*b. include the signature of the appropriate state agency staff member (designated certifying agent)?	①	②	
			*c. indicate that the client has met the pertinent requirements?	①	②	
			d. indicate the client's name?	①	②	③
			* 15. show that certification for extended evaluation was based on:			
			*a. the presence of a medically recognized physical or mental disability?	①	②	③
			*b. the determination that the medically recognized physical or mental disability constitutes a substantial handicap to employment for the client?	①	②	③
			*c. the inability to make a determination that VR services might benefit the client in terms of employability without providing an extended evaluation?	①	②	③
			* 16. show that the extended evaluation period began with the date of certification to determine rehabilitation potential?	①	②	
			* 17. show that extended evaluation was provided to the client for a total period not in excess of 18 months?	①	②	
			Individualized Written Rehabilitation Program (IWRP) For Extended Evaluation			
	X		* 18. Is there an IWRP for extended evaluation in the case record?	①	②	

NOTE: IMPORTANT INSTRUCTIONS

If there is an IWRP for extended evaluation in the case record, answer questions 19 through 42 below.

If there is no IWRP for extended evaluation in the case record, go on to question 43, page 10.

* Required for conformance with Regulations and Guidelines.

ELIG.	IWRP	SUPP. EVAL.	SECTION II: EVALUATION OF REHABILITATION POTENTIAL B. EXTENDED EVALUATION - STATUS 06 (continued)	YES	NO	
			Individualized Written Rehabilitation Program (IWRP) For Extended Evaluation *Does the IWRP for extended evaluation (state form) . . .*			
X	X		* 19. present the general basis for a determination that an extended evaluation of rehabilitation potential is necessary to make a determination of eligibility?	①	②	
			* 20. set forth the terms and conditions for the provision of service, including:			
	X		*a. client responsibilities in carrying out the program, such as attendance, cooperation, etc?	①	②	
	X		*b. the extent of client participation in the cost of services?	①	②	
		(X)	*c. the extent to which the client is eligible for similar benefits under other programs?	①	②	
		(X)	d. the availability of VR funds?	①	②	
		(X)	e. the availability of openings at facilities and schools?	①	②	③
		(X)	f. the possibility of delay in a phase of the program?	①	②	
			g. the provision for changes in the program due to new information and changing conditions?	①	②	
			h. the condition that the continuation of services is dependent upon an on-going evaluation (including the health status of the client) and the likelihood of the client's ability to benefit in terms of employability?	①	②	
			* 21. document that the client was informed of client rights and remedies, including:			
	X		*a. the right to be fully consulted regarding any changes or amendments in the rehabilitation program?	①	②	
	X		*b. the right to administrative review in case of dissatisfaction with services?	①	②	
		(X)	*c. the availability of resources within the Client Assistance Project, where appropriate?	①	②	
	X		*d. the right to participate in the annual review of the program?	①	②	
	X		*e. the right to participate in the annual review of the ineligibility decision?	①	②	
	X		* 22. reflect that the IWRP for extended evaluation was maintained as a separate part of the case record?	①	②	

* Required for conformance with Regulations and Guidelines.

EVAL.	IWRP	SUPP. EVAL.	SECTION II: EVALUATION OF REHABILITATION POTENTIAL B. EXTENDED EVALUATION - STATUS 06 (continued)	ANSWER YES	 NO	 N/A
			Does the IWRP for extended evaluation . . .			
	X		* 23. show that the client received a copy of the IWRP and substantial amendments?	①	②	
		(X)	* 24. show that the program was initiated after the certification for extended evaluation?	①	②	
			* 25. show that the program was continuously developed after the certification for extended evaluation?	①	②	
	X		* 26. indicate that the program was developed and amended with the client's participation, or as appropriate, with the parent, guardian, or other representative?	①	②	
			* 27. show that consideration was given to the client's need for assistive devices or supportive services in the development of the program?	①	②	③
	X		* 28. state the intermediate rehabilitation objectives?	①	②	
	X		* 29. state the VR services to be provided which are necessary for the determination of rehabilitation potential?	①	②	
	X		* 30. contain the projected date for the initiation of each service?	①	②	
	X		* 31. contain the anticipated duration for each service planned?	①	②	
	X		* 32. provide the projected time within which rehabilitation objectives may be achieved?	①	②	
X	X	(X)	* 33. show that a thorough assessment of the client's progress was made at least once in every 90-day period during the provision of servcces under the extended evaluation?	①	②	③
	X		* 34. state the objective criteria upon which an evaluation of the client's progress is based?	①	②	
	X		* 35. state the procedure by which the client is evaluated?	①	②	
	X		* 36. contain a schedule for the periodic reviews and progress evaluations?	①	②	
	X		* 37. contain a record of the results of scheduled reviews and progress evaluations?	①	②	
	X		* 38. show that a formal, annual review has been conducted if the IWRP has achieved at least first anniversary status?	①	②	③
	X		* 39. document the client's views, or, as appropriate, the views of the parent, guardian, or other representative concerning the objectives and VR services being provided?	①	②	

NOTE: IMPORTANT INSTRUCTIONS

If the client has been determined eligible as a result of extended evaluation, answer questions 40 and 41.

If the client has been determined ineligible as a result of extended evaluation, answer question 42.

* Required for conformance with Regulations and Guidelines.

				ANSWER		
ELIG.	IWRP	SUPP. EVAL.	SECTION II: EVALUATION OF REHABILITATION POTENTIAL B. EXTENDED EVALUATION - STATUS 06 (continued)	YES	NO	N/A
X			*Does the case record . . .* * 40. contain a certification of eligibility for the continuance of VR services?	①	②	
			Does the IWRP for extended evaluation . . . * 41. contain an amendment to the program when the extended evaluation program is terminated because the client is determined eligible?	①	②	
			If YES, does the case record . . . *a. show that the amended IWRP set forth all new decisions and facts not already covered in the program?	①	②	
			*b. show that the amended IWRP set forth planned services not already covered in the program?	①	②	
X	X		*Does the IWRP for extended evaluation . . .* * 42. contain a closure statement as an amendment to the program for the client determined ineligible because of a lack of rehabilitation potential?	①	②	
X	X		*If YES, does the case record . . .* *a. show that the decision to terminate services was made in full consultation with the client, or as appropriate, with the parent, guardian, or other representative?	①	②	
	X		*b. show that the rationale for the decision to terminate services was recorded as a certified amendment to the IWRP for extended evaluation?			
	X		*c. show that a certification of ineligibility was then executed?	①	②	
X	X		*d. show that the provision was made for a periodic review, at least annually, of the ineligibility decision?	①	②	

* Required for conformance with Regulations and Guidelines.

SECTION II: EVALUATION OF REHABILITATION POTENTIAL
B. EXTENDED EVALUATION - STATUS 06

Delivery of Services

INSTRUCTIONS: Please answer the following questions (A-G) for each of the service categories (43-48) listed at the right. If the answer space is blank, please go on to the next question for that service.

ELIG.	IWRP	SUPP. EVAL.	ITEM	43	44	45	46	47	48
			SERVICE	Diagnostic and Related Services	Counseling and Guidance	Physical Restoration	Mental Restoration	Vocational and Other Training	Maintenance
			*A. Does the case record indicate that the service was necessary to determine the client's rehabilitation potential?	① YES ② NO	① YES ② NO	① YES ② NO	① YES ② NO	① YES ② NO	① YES ② NO
	X	(X)	*B. Does the case record document that the service was planned for the client?	① YES ② NO	① YES ② NO	① YES ② NO	① YES ② NO	① YES ② NO	① YES ② NO
	X	(X)	*C. Does the case record document that the service was given to the client?	① YES ② NO ③ N/A	① YES ② NO ③ N/A	① YES ② NO ③ N/A	① YES ② NO ③ N/A	① YES ② NO ③ N/A	① YES ② NO ③ N/A
			If YES, *D. Was the service provided consistent with the individualized written rehabilitation program for extended evaluation?	① YES ② NO	① YES ② NO	① YES ② NO	① YES ② NO	① YES ② NO	① YES ② NO
		(X)	*E. Was full consideration given to any similar benefits available to the client to meet, in whole or in part, the cost of the service?	③	③	① YES ② NO ③ N/A	① YES ② NO ③ N/A	① YES ② NO ③ N/A	① YES ② NO ③ N/A
			*F. Was the service given only after the client's financial status was evaluated, if the state regulations require a "needs test" prior to furnishing the service?	③	③	① YES ② NO ③ N/A	① YES ② NO ③ N/A	① YES ② NO ③ N/A	① YES ② NO ③ N/A
			*G. Was the quality of case management in the delivery of the service adequate?	① YES ② NO	① YES ② NO	① YES ② NO	① YES ② NO	① YES ② NO	① YES ② NO

* Required for conformance with Regulations and Guidelines.

SECTION II: EVALUATION OF REHABILITATION POTENTIAL
B. EXTENDED EVALUATION - STATUS 06

ELIG.	IWRP	SUPP. EVAL.	ITEM	49	50	51	52	53	54
			SERVICE	Transportation	Services to the Family	Specialized Services for Blind, Deaf, Severe Disabilities	Telecommunications	Occupational Licenses, Tools, Equipment	Other Goods and Services
			Delivery of Services INSTRUCTIONS: Please answer the following questions (A-G) for each of the service categories (49-54) listed at the right. If the answer space is blank, please go on to the next question for that service.						
			*A. Does the case record indicate that the service was necessary to determine the client's rehabilitation potential?	① YES ② NO	① YES ② NO	① YES ② NO	① YES ② NO	① YES ② NO	① YES ② NO
	X		*B. Does the case record document that the service was planned for the client?	① YES ② NO	① YES ② NO	① YES ② NO	① YES ② NO	① YES ② NO	① YES ② NO
	X		*C. Does the case record document that the service was given to the client?	① YES ② NO ③ N/A	① YES ② NO ③ N/A	① YES ② NO ③ N/A	① YES ② NO ③ N/A	① YES ② NO ③ N/A	① YES ② NO ③ N/A
			If YES, *D. Was the service provided consistent with the individualized written rehabilitation program for extended evaluation?	① YES ② NO	① YES ② NO	① YES ② NO	① YES ② NO	① YES ② NO	① YES ② NO
		(X)	*E. Was full consideration given to any similar benefits available to the client to meet, in whole or in part, the cost of the service?	① YES ② NO ③ N/A	① YES ② NO ③ N/A	① YES ② NO ③ N/A	① YES ② NO ③ N/A	① YES ② NO ③ N/A	① YES ② NO ③ N/A
			*F. Was the service given only after the client's financial status was evaluated, if the state regulations require a "needs test" prior to furnishing the service?	① YES ② NO ③ N/A	① YES ② NO ③ N/A	① YES ② NO ③ N/A	① YES ② NO ③ N/A	① YES ② NO ③ N/A	① YES ② NO ③ N/A
			G. Was the quality of case management in the delivery of the service adequate?	① YES ② NO	① YES ② NO	① YES ② NO	① YES ② NO	① YES ② NO	① YES ② NO

* Required for conformance with Regulations and Guidelines.

NOTE: IMPORTANT INSTRUCTIONS

If case is certified eligible, go to Section III, question 1, page 13, to complete section on Eligibility.

If case data does not support the determination that the client is eligible although the client is certified as such, set case aside for review by full review team.

If case is closed in Status 08, go to Section VII, page 23, to complete the appropriate subsection on Status 08 closures.

For questions 1 and 2, please answer with:

① = YES
② = NO
③ = NOT APPLICABLE (N/A)

ELIG.	IWRP	SUPP. EVAL.	SECTION III: ELIGIBILITY - STATUS 10	ANSWER YES	NO	N/A
			Does the case record . . .			
X			* 1. contain a certification of eligibility?	①	②	
			If YES, does the certification of eligibility . . .			
			* a. indicate the date of certification?	①	②	
			* b. include the signature of the appropriate state agency staff member (designated certifying agent)?	①	②	
X			* c. indicate that the client has met the basic eligibility requirements?	①	②	
			d. indicate the client's name?	①	②	③
		(X)	* 2. contain data supporting a determination that the client is severely disabled?	①	②	③

* Required for conformance with Regulations and Guidelines.

For questions 3 through 8, please answer with:

① = LESS THAN ADEQUATE
② = ADEQUATE
③ = NOT APPLICABLE (N/A)

				ANSWER		
ELIG.	IWRP	SUPP. EVAL.	SECTION III: ELIGIBILITY - STATUS 10 (continued)	LESS	ADEQ.	N/A
			Physical or Mental Disability *How well does the counselor documentation in the case record . . .*			
X			* 3. establish the presence of a physical or mental disability with necessary medical, psychiatric, psychological, and other information?	①	②	
			* 4. show that the physical or mental disability materially limits, contributes to limiting, or if not corrected, would probably result in limiting a client's activities or functioning?	①	②	
			Substantial Handicap to Employment *How well does the counselor documentation in the case record . . .* * 5. analyze the specific ways in which the following factors, as appropriate to the client, impede the client's occupational performance by preventing the client from obtaining, retaining, or preparing for employment consistent with the client's capacities and abilities:			
			*a. medical factors?	①	②	③
			*b. psychological factors?	①	②	③
			*c. vocational factors?	①	②	③
			*d. educational factors?	①	②	③
			6. show that the related factors which bear upon successful vocational participation were considered?	①	②	③
X			* 7. show that the substantial handicap to employment exists, even though the client is employed, because the client is unable to obtain a gainful occupation consistent with the client's capacities and abilities?	①	②	③
			Reasonable Expectation *How well does the counselor documentation in the case record . . .*			
X			* 8. show the likelihood of VR services enabling the client to achieve vocational goals consistent with the client's capacities and abilities?	①	②	

* Required for conformance with Regulations and Guidelines.

For questions 1 through 7, please answer with:

① = YES
② = NO
③ = NOT APPLICABLE (N/A)

ELIG.	IWRP	SUPP. EVAL.	SECTION IV: EVALUATION OF REHABILITATION POTENTIAL THOROUGH DIAGNOSTIC STUDY - STATUSES 02 AND 10	ANSWER		
				YES	NO	N/A
			Does the thorough diagnostic study . . .			
		(X)	* 1. determine the nature of VR services needed by the client?	①	②	
		(X)	* 2. determine the scope of VR services which are needed to attain the vocational goals of the client?	①	②	
			*# 3. contain the necessary specialty examination(s):	①	②	③
			If YES, does the thorough diagnostic study document that the necessary specialty examination was given in the cases specified below:			
			*# a. a visual evaluation in all cases of visual impairment?	①	②	③
			*# b. a screening for hearing loss in all cases of blindness?	①	②	③
			*# c. an evaluation of the auditory system in all cases of hearing impairment?	①	②	③
			*# d. a psychological evaluation in all cases of mental retardation (including a valid test of intelligence and an assessment of social functioning, educational progress, and achievement)?	①	②	③
			*# e. other? Please specify: ______________.	①	②	③
			*# 4. document that when planning for physical and mental restoration services, consideration is given to the following criteria for the provision of physical and mental restoration services:			
			*# a. that the clinical status of the physical or mental condition is stable or slowly progressive?	①	②	③
			*# b. that physical or mental restoration services are expected to eliminate, substantially reduce or contain the impact of the disabling condition within a "reasonable period of time"?	①	②	③
		(X)	*# 5. consist of a comprehensive evaluation, to the degree needed, of pertinent medical, psychological, vocational, educational, and other related factors which bear on the client's handicap to employment?	①	②	
			* 6. contain data supporting a determination that the client is severely disabled?	①	②	③
			7. document the use of state agency consultation:			
			a. medical?	①	②	③
			b. psychiatric?	①	②	③
			c. psychological?	①	②	③

* Required for conformance with Regulations and Guidelines.

May be discussed with medical consultant for clarification/interpretation.

For questions 8 through 16, please answer with:

① = LESS THAN ADEQUATE
② = ADEQUATE
③ = NOT APPLICABLE (N/A)

ELIG.	IWRP	SUPP. EVAL.	SECTION IV: EVALUATION OF REHABILITATION POTENTIAL THOROUGH DIAGNOSTIC STUDY - STATUSES 02 AND 10 (continued)		ANSWER		
					LESS	ADEQ.	N/A
			A. *To the degree necessary, how well does the data in the case record describe . . .* B. *To the degree necessary, how well does the counselor documentation in the case record appraise . . .*				
			* 8. personal adjustment?	A. (describe)	①	②	③
				B. (appraise)	①	②	③
			* 9. vocational adjustment?	A. (describe)	①	②	③
				B. (appraise)	①	②	③
			* 10. social adjustment?	A. (describe)	①	②	③
				B. (appraise)	①	②	③
			* 11. intelligence level?	A. (describe)	①	②	③
				B. (appraise)	①	②	③
			* 12. prior educational achievements?	A. (describe)	①	②	③
				B. (appraise)	①	②	③
			* 13 work experience?	A. (describe)	①	②	③
				B. (appraise)	①	②	③
			* 14 ability to acquire occupational skill?	A. (describe)	①	②	③
				B. (appraise)	①	②	③
			* 15. capacity for successful job performance?	A. (describe)	①	②	③
				B. (appraise)	①	②	③
			* 16. client's employment opportunities?	A. (describe)	①	②	③
				B. (appraise)	①	②	③

* Required for conformance with Regulations and Guidelines.

For questions 1 through 26, please answer with:

① = YES

② = NO

③ = NOT APPLICABLE (N/A)

ELIG.	IWRP	SUPP. EVAL.	SECTION V: INDIVIDUALIZED WRITTEN REHABILITATION PROGRAM (IWRP) - STATUS 12 AND ABOVE	ANSWER YES	NO	N/A
	X		* 1. Is there an IWRP in the case record?	①	②	
			NOTE: IMPORTANT INSTRUCTIONS If there is an IWRP in the case record, answer questions 2 through 26 below. If there is no IWRP in the case record and services are being provided, go to Section VI, page 21. If there is no IWRP in the case record and no services are being provided, go to Section VII, page 23.			
			Does the IWRP (state form) . . .			
	X		* 2. present the general basis for a determination of eligibility?	①	②	
			* 3. set forth the terms and conditions for the provision of services, including:			
	X		* a. client responsibilities in carrying out the program, such as cooperation, attendance, etc.?	①	②	
	X		* b. the extent of client participation in the cost of services?	①	②	
		(X)	* c. the extent to which the client is eligible for similar benefits under other programs?	①	②	
		(X)	d. the availability of VR funds?	①	②	③
		(X)	e. the availability of openings at facilities and schools?	①	②	③
		(X)	f. the possibility of delay in a phase of the program?	①	②	③
			g. the provision for changes in the program due to new information and changing conditions?	①	②	③
			h. the condition that the continuation of services is dependent upon on-going evaluation (including the health status of the client) and the likelihood of the client's ability to benefit in terms of employability?	①	②	③
			* 4. document that the client was informed of client rights and remedies including:			
	X		* a. the right to be fully consulted regarding any changes or amendments in the rehabilitation program?	①	②	
	X		* b. the right to administrative review in case of dissatisfaction with services?	①	②	
		(X)	* c. the availability of resources within the Client Assistance Project, where appropriate?	①	②	③

* Required for conformance with Regulations and Guidelines.

ELIG.	IWRP	SUPP. EVAL.	SECTION V: INDIVIDUALIZED WRITTEN REHABILITATION PROGRAM (IWRP) - STATUS 12 AND ABOVE (continued)	ANSWER YES	 NO	 N/A
			Does the IWRP (state form) . . .			
			* 4. document that the client was informed of client rights and remedies including:			
	X		* d. the right to participate in the annual review of the program?	①	②	
	X		* e. the right to participate in the annual review of the ineligibility decision?	①	②	
	X		* 5. reflect that the IWRP was maintained as a separate part of the case record?	①	②	
			Does the IWRP . . .			
	X		* 6. show that the client received a copy of the IWRP and substantial amendments?	①	②	
		(X)	* 7. show that the program was initiated after the execution of the certification for eligibility?	①	②	
			* 8. show that the program was continuously developed after the execution of the certification for eligibility?	①	②	
	X		* 9. indicate that the program was developed and amended with the client's participation or, as appropriate with the parent, guardian, or other representative?	①	②	
			* 10. show that consideration was given to the client's need for supportive services or assistive devices in the development of the program?	①	②	③
	X		* 11. place primary emphasis on the determination and achievement of a vocational goal?	①	②	
	X		* 12. state the long-range employment goal?	①	②	
	X		* 13. state the intermediate rehabilitation objectives?	①	②	
	X		* 14. state the specific VR services to be provided to achieve the intermediate objectives and the employment goal?	①	②	
	X		* 15. contain the projected date for the initiation of each service?	①	②	
	X		* 16. contain the anticipated duration for each service planned?	①	②	
	X		* 17. provide the projected time within which rehabilitation objectives and goals may be achieved?	①	②	
	X		* 18. state the objective criteria upon which an evaluation of the client's progress toward an employability goal is based?	①	②	
	X		* 19. state the procedure by which the client is evaluated?	①	②	
	X		* 20. contain a schedule for the periodic reviews and progress evaluations?	①	②	
	X		* 21. contain a record of the results of the scheduled reviews and evaluations?	①	②	③
	X		* 22. show that a formal, annual review has been conducted, if the IWRP has achieves at least first anniversary status?	①	②	③
	X		* 23. document the client's views, or as appropriate, the views of the parent, guardian, or other representative concerning the goals, objectives, and VR services being provided?	①	②	

* Required for conformance with Regulations and Guidelines.

ELIG.	IWRP	SUPP. EVAL.	SECTION V: INDIVIDUALIZED WRITTEN REHABILITATION PROGRAM (IWRP) - STATUS 12 AND ABOVE (continued).		ANSWER	
				YES	NO	N/A
			NOTE: IMPORTANT INSTRUCTIONS If case is closed non-rehabilitated, answer question 24. If case is closed rehabilitated, answer question 25. If case is closed rehabilitated and post-employment services have been planned, answer question 25.			
			Does the IWRP . . .			
	X		* 24. contain a closure statement as an amendment to the program when the case is closed non-rehabilitated because the client is not capable of achieving a vocational goal?	①	②	
			If YES, *does the case record . . .*			
	X		* a. show that the decision to terminate services was made in full consultation with the client or as appropriate, with the parent, guardian, or other representative?	①	②	
	X		* b. show that the rationale for the decision to terminate services was recorded as a certified amendment to the IWRP?	①	②	
	X		* c. show that a certification of ineligibility was then executed?	①	②	
	X		* d. show that the provision was made for a periodic review, at least annually, of the ineligibility decision?	①	②	
			Does the IWRP . . .			
	X		* 25. contain a closure statement as an amendment to the program for a case closed rehabilitated?	①	②	
			If YES, *does the statement include:*			
	X		* a. a description of the basis upon which the client was determined to be rehabilitated?	①	②	
			* b. the type of occupation?	①	②	
			* c. the length of time the client has been engated in the occupation?	①	②	
			* d. a description of why it is determined that the client made a satisfactory vocational adjustment?	①	②	
		(X)	* e. any plans for the provision of post-employment services after a suitable objective has been achieved?	①	②	

* Required for conformance with Regulations and Guidelines.

ELIG.	IWRP	SUPP. EVAL.	SECTION V: INDIVIDUALIZED WRITTEN REHABILITATION PROGRAM (IWRP) - STATUS 12 AND ABOVE (continued)	ANSWER		
				YES	NO	N/A
	X		* 25. Is there an amended IWRP for Post-Employment Services?	①	②	③
			If YES, does the amended IWRP . . .			
		(X)	*a. provide the basis on which plans for post-employment services have been developed?	①	②	
		(X)	*b. describe the outcome to be achieved or the outcome of post-employment services?	①	②	
		(X)	*c. describe the type and extent of post-employment services to be or being provided?	①	②	
			*d. include the progress assessments?	①	②	
			*e. document the reason for the termination of post-employment services?	①	②	③
			*f. document that the decision to terminate post-employment services was made in consultation with the client?	①	②	③

* Required for conformance with Regulations and Guidelines.

SECTION VI: DELIVERY OF SERVICES - STATUS 14, 16, 18, 20, 22, and 32

INSTRUCTIONS: Please answer the following questions (A-I) for each of the service categories (Items 1-7) listed at the right. If an answer space is blank, please go on to the next question for that service.

ELIG.	IWRP	SUPP. EVAL.	ITEM	1	2	3	4	5	6	7
			SERVICE	Evaluation and Diagnostic Services	Counseling and Guidance	Physical Restoration	Mental Restoration	Vocational and other Training	Maintenance	Transportation
			*A. Does the case record indicate that the service was necessary for the client?	① YES ② NO	① YES ② NO	① YES ② NO	① YES ② NO	① YES ② NO	① YES ② NO	① YES ② NO
	X	(X)	*B. Does the case record document that the service was planned for the client?	① YES ② NO	① YES ② NO	① YES ② NO	① YES ② NO	① YES ② NO	① YES ② NO	① YES ② NO
	X	(X)	*C. Does the case record document that the service was given to the client?	① YES ② NO ③ N/A	① YES ② NO ③ N/A	① YES ② NO ③ N/A	① YES ② NO ③ N/A	① YES ② NO ③ N/A	① YES ② NO ③ N/A	① YES ② NO ③ N/A
			If YES, *D. Was the service provided consistent with the diagnosis and evaluation of rehabilitation potential?	① YES ② NO	① YES ② NO	① YES ② NO	① YES ② NO	① YES ② NO	① YES ② NO	① YES ② NO
			*E. Was the service provided consistent with the individualized written rehabilitation program?	① YES ② NO	① YES ② NO	① YES ② NO	① YES ② NO	① YES ② NO	① YES ② NO	① YES ② NO
		(X)	*F. Was the service provided consistent with employment at closure?	① YES ② NO	① YES ② NO	① YES ② NO	① YES ② NO	① YES ② NO	① YES ② NO	① YES ② NO
		(X)	*G. Was full consideration given to any similar benefits available to the client to meet, in whole or in part, the cost of the service?	③	③	① YES ② NO ③ N/A	① YES ② NO ③ N/A	① YES ② NO ③ N/A	① YES ② NO ③ N/A	① YES ② NO ③ N/A
			*H. Was the service given only after the client's financial status was evaluated, if the state regulations require a "needs test" prior to furnishing the service?	③	③	① YES ② NO ③ N/A	① YES ② NO ③ N/A	① YES ② NO ③ N/A	① YES ② NO ③ N/A	① YES ② NO ③ N/A
			I. Was the quality of case management in the delivery of the service adequate?	① YES ② NO	① YES ② NO	① YES ② NO	① YES ② NO	① YES ② NO	① YES ② NO	① YES ② NO

* Required for conformance with Regulations and Guidelines.

SECTION VI: DELIVERY OF SERVICES - STATUS 14, 16, 18, 20, 22, and 32

ELIG.	IWRP	SUPP. EVAL.	ITEM	8	9	10	11	12	13	14
			INSTRUCTIONS: Please answer the following questions (A-I) for each of the service categories (Items 8-14) listed at the right. If an answer space is blank, please go on to the next question for that service. SERVICE	Services to the Family	Specialized Services for Blind Deaf, Severe Disabilities	Tele-communications	Occupational Licenses, Tools, Equipment	Other Goods and Services	Placement	Post-Employment
			*A. Does the case record indicate that the service was necessary for the client?	① YES ② NO	① YES ② NO	① YES ② NO	① YES ② NO	① YES ② NO	① YES ② NO	① YES ② NO
	X	(X)	*B. Does the case record document that the service was planned for the client?	① YES ② NO	① YES ② NO	① YES ② NO	① YES ② NO	① YES ② NO	① YES ② NO	① YES ② NO
	X	(X)	*C. Does the case record document that the service was given to the client?	① YES ② NO ③ N/A	① YES ② NO ③ N/A	① YES ② NO ③ N/A	① YES ② NO ③ N/A	① YES ② NO ③ N/A	① YES ② NO ③ N/A	① YES ② NO ③ N/A
			If YES,							
			*D. Was the service provided consistent with the diagnosis and evaluation of rehabilitation potential?	① YES ② NO	① YES ② NO	① YES ② NO	① YES ② NO	① YES ② NO	① YES ② NO	① YES ② NO
			*E. Was the service provided consistent with the individualized written rehabilitation program?	① YES ② NO	① YES ② NO	① YES ② NO	① YES ② NO	① YES ② NO	① YES ② NO	① YES ② NO
		(X)	*F. Was the service provided consistent with employment at closure?	① YES ② NO	① YES ② NO	① YES ② NO	① YES ② NO	① YES ② NO	① YES ② NO	① YES ② NO
		(X)	*G. Was full consideration given to any similar benefits available to the client to meet, in whole or in part, the cost of the service?	① YES ② NO ③ N/A	① YES ② NO ③ N/A	① YES ② NO ③ N/A	① YES ② NO ③ N/A	① YES ② NO ③ N/A	③	① YES ② NO ③ N/A
			*H. Was the service given only after the client's financial status was evaluated, if the state regulations require a "needs test" prior to furnishing the service?	① YES ② NO ③ N/A	① YES ② NO ③ N/A	① YES ② NO ③ N/A	① YES ② NO ③ N/A	① YES ② NO ③ N/A	③	① YES ② NO ③ N/A
			I. Was the quality of case management in the delivery of the service adequate?	① YES ② NO	① YES ② NO	① YES ② NO	① YES ② NO	① YES ② NO	① YES ② NO	① YES ② NO

* Required for conformance with Regulations and Guidelines.

SECTION VII: TERMINATION OF CASES

NOTE: IMPORTANT INSTRUCTIONS

Please procede to the appropriate subsection according to the case status at closure as indicated below. If the case is in an open status, go on to Section VIII, page 33.

If the case is closed in Status 08 from Status 00/02 for intervening reasons, answer questions 1 through 5, page 24.

If the case is closed in Status 08 from Status 00/02 due to ineligibility, answer questions 6 through 16, pages 25-26.

If the case is closed in Status 08 from Status 06, answer questions 17 through 27, page 27.

If the case is closed in Status 30 or Status 28, answer questions 28 through 41, pages 28-29.

If the case is closed in Status 26, answer questions 42 through 58, pages 30-32.

For questions 1 through 5, please answer with:

① = YES

② = NO

③ = NOT APPLICABLE (N/A)

ELIG.	IWRP	SUPP. EVAL.	SECTION VII: TERMINATION OF CASES - STATUS 08	ANSWER		
				YES	NO	N/A
			Case Closed Status 08 From 00/02 - Intervening Reasons *Does the case record . . .* * 1. contain a copy of the Case Service Report R-300 or the equivalent state statistical reporting form?	①	②	
			If YES, *a. is the Case Service Report R-300 properly completed?	①	②	
			*b. is the Case Service Report R-300 dated?	①	②	
			*c. is the Case Service Report R-300 signed?	①	②	
X			* 2. document specific reasons for the closure action? *If* YES, *does the case record document that the client became unavailable for interview, evaluation, and diagnostic studies, or other services essential for making eligibility/ineligibility determinations because the client:*	①	②	
		(X)	*a. died?	①	②	③
		(X)	*b. moved out of state or was impossible to contact?	①	②	③
		(X)	*c. was institutionalized under circumstances which rendered the client unavailable?	①	②	③
		(X)	* 3. show that the client was referred to other agencies and facilities, as appropriate?	①	②	③
		(X)	* 4. show that the action taken and outcome were reported to other agencies, as appropriate?	①	②	③
X			5. show that the client, or as appropriate, the parent, guardian, or other representative, was advised of the reasons for closure and the closure action taken?	①	②	③

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* Required for conformance with Regulations and Guidelines.

For questions 6 through 16, please answer with:

① = YES
② = NO
③ = NOT APPLICABLE (N/A)

ELIG.	IWRP	SUPP. EVAL.	SECTION VII: TERMINATION OF CASES - STATUS 08	ANSWER YES	ANSWER NO	ANSWER N/A
			Case Closed Status 08 From 00/02 - Ineligibility			
			Does the case record . . .			
X			* 6. contain a certification of ineligibility?	①	②	
			If YES, *does the certification of ineligibility . . .*			
X			*a. indicate the date of certification?	①	②	
			*b. include a signature of the appropriate state agency staff member (designated certifying agent)?	①	②	
X			*c. include the reasons for the determination of ineligibility?	①	②	
			d. indicate the client's name?	①	②	③
X			* 7. show that the client does not have a medically recognized physical or mental disability?	①	②	③
X			* 8. show that the client does not have a substantial handicap to employment?	①	②	③
X			* 9. show that beyond any reasonable doubt the client is not expected to benefit in terms of employability from VR services?	①	②	③
			* 10. contain data supporting the ineligibility determination, including:			
X			*a. a summary of medical and other case data obtained during the preliminary diagnostic study?	①	②	
X			*b. an analysis specifying the reasons for the ineligibility determination?	①	②	
			*c. a summary of the counseling activities?	①	②	
X			*d. documentation of a review of the ineligibility determination not later than 12 months following such determination?	①	②	③
X			* 11. show that the ineligibility determination was made only after full consultation with the client, or as appropriate, with the parent, guardian, or other representative?	①	②	
X			* 12. document that the client was notified in writing of the closure action taken?	①	②	
			* 13. document that the client was informed in writing of client rights and remedies, including:			
X			*a. the right to administrative review and fair hearing?	①	②	
		(X)	*b. the availability of resources within the Client Assistance Project, where appropriate?	①	②	③
X			*c. the right to participate in the annual review of the ineligibility determination?	①	②	

* Required for conformance with Regulations and Guidelines.

ELIG.	IWRP	SUPP. EVAL.	SECTION VII: TERMINATION OF CASES - STATUS 08 (continued)	ANSWER		
				YES	NO	N/A
			Does the case record . . .			
X			* 14. document any action and decision involving the client's request for an administrative review of agency action or fair hearing?	①	②	③
		(X)	* 15. show that the client was referred to other agencies and facilities, as appropriate?	①	②	③
		(X)	* 16. show that the action taken and outcome were reported to other agencies, as appropriate?	①	②	③

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* Required for conformance with Regulations and Guidelines.

For questions 17 through 27, please answer with:

① = YES
② = NO
③ = NOT APPLICABLE (N/A)

ELIG.	IWRP	SUPP. EVAL.	SECTION VII: TERMINATION - STATUS 08	ANSWER		
				YES	NO	N/A
			Case Closed Status 08 From 06 - Ineligibility			
			Does the case record . . .			
X			* 17. contain a certification of ineligibility?	①	②	
			If YES, does the certification of ineligibility . . .			
X			*a. indicate the date of certification?	①	②	
			*b. include the signature of the appropriate state agency staff member (designated certifying agent)?	①	②	
X			*c. include the reasons for the determination of ineligibility?	①	②	
			d. indicate the client's name?	①	②	③
X			* 18. show that beyond any reasonable doubt the client cannot be expected to benefit in terms of employability from VR services?	①	②	③
		(X)	* 19. show that the interruption of services precluded the continuation of the IWRP for extended evaluation?	①	②	③
X	X		* 20. contain the rationale for the ineligibility determination as an amendment to the IWRP?	①	②	
X			* 21. show that the ineligibility determination was made only after full consultation with the client, or as appropriate with the parent, guardian, or other representative?	①	②	③
	X		* 22. show that the IWRP contains the views of the client, or as appropriate, the parent, guardian, or other representative concerning the ineligibility determination?	①	②	③
X			* 23. document that the client was informed in writing of the closure action taken?	①	②	
X			* 24. document any action and decision involving the client's request for an administrative review of agency action or fair hearing?	①	②	③
X			* 25. document that the ineligibility determination was reviewed not later than 12 months following such determination?	①	②	③
		(X)	* 26. show that the client was referred to other agencies and facilities, as appropriate?	①	②	③
		(X)	* 27. show that the action taken and outcome were reported to other agencies, as appropriate?	①	②	③

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* Required for conformance with Regulations and Guidelines.

For questions 28 through 41, please answer with:

① = YES

② = NO

③ = NOT APPLICABLE (N/A)

ELIG.	IWRP	SUPP. EVAL.	SECTION VII: TERMINATION OF CASES - STATUSES 30 and 28	ANSWER YES	NO	N/A
			Case Closed Status 30 or Status 28 - Not Rehabilitated			
			Does the case record . . .			
X			* 28. contain a certification of ineligibility?	①	②	
			If YES, does the certification of ineligibility . . .			
X			*a. indicate the date of certification?	①	②	
			*b. include the signature of the appropriate state agency staff member (designated certifying agent)?	①	②	
X			*c. include the reasons for the determination of ineligibility?	①	②	
			d. indicate the client's name?	①	②	③
		(X)	* 29. show that suitable employment cannot be achieved?	①	②	③
		(X)	* 30. show that employment resulted without benefit derived from VR services?	①	②	③
			* 31. document that one of the following situations necessitated closing the case as not rehabilitated:			
		(X)	*a. the client decided not to follow through?	①	②	③
		(X)	*b. contact was lost with the client?	①	②	③
		(X)	*c. there was new information or complications?	①	②	③
		(X)	* 32. document that when there was new information or complications, the client was referred to another agency, as appropriate?	①	②	③
		(X)	* 33. document that when the client moved to another state, effort was made to continue or arrange VR services?	①	②	③
X	X		* 34. contain the rationale for the ineligibility determination as an amendment to the program? (For case closed Status 30 from Status 10, answer N/A.)	①	②	③
X	X		* 35. show that the ineligibility determination was made only after full consultation with the client, or as appropriate, with the parent, guardian, or other representative?	①	②	③
X			* 36. document that the client was notified in writing of the closure action taken?	①	②	
X			* 37. document that the client was informed in writing of client rights and remedies? (For case closed Status 30 from Status 10, answer N/A.)	①	②	③
			If YES, does the case record show that the client was informed in writing of . . .			
X			*a. the right to administrative review and fair hearing?	①	②	
X			*b. the right to participate in the annual review of the ineligibility determination?	①	②	

* Required for conformance with Regulations and Guidelines.

ELIG.	IWRP	SUPP. EVAL.	SECTION VII: TERMINATION OF CASES - STATUSES 30 and 28 (continued)	ANSWER		
				YES	NO	N/A
			Does the case record . . .			
X			* 38. document any action and decision involving the client's request for an administrative review of agency action or fair hearing?	①	②	③
X			* 39. document that the determination that the client was no longer eligible was reviewed not later than 12 months following such determination?	①	②	③
		(X)	* 40. show that the client was referred to other agencies and facilities, as appropriate?	①	②	③
		(X)	* 41. show that the action taken and outcome were reported to other agencies, as appropriate?	①	②	③

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* Required for conformance with Regulations and Guidelines.

For questions 42 through 51, please answer with:

① = YES
② = NO
③ = NOT APPLICABLE (N/A)

ELIG.	IWRP	SUPP. EVAL.	SECTION VII: TERMINATION OF CASES - STATUS 26	ANSWER		
				YES	NO	N/A
			Case Closed Status 26 - Rehabilitated			
			Does the case record . . .			
		(X)	* 42. contain a closure statement as an amendment to the IWRP?	①	②	
			If YES, *does the statement include*:			
		(X)	*a. a description of the basis upon which the client was determined to be rehabilitated?	①	②	
		(X)	*b. the type of occupation?	①	②	
		(X)	*c. the length of time the client has been engaged in the occupation?	①	②	
		(X)	*d. a description of why it is determined that the client has made a satisfactory adjustment?	①	②	
		(X)	*e. any plans for the provision of post-employment services after a suitable objective has been achieved?	①	②	
			* 43. show that the client was provided with essential VR services, including:			
			*a. an evaluation of rehabilitation potential?	①	②	
			*b. counseling and guidance?	①	②	
		(X)	* 44. show that the client was provided with appropriate VR services in accordance with the IWRP?	①	②	
		(X)	* 45. show that the client has completed the total program of services as described in the client's rehabilitation program, including amendments?	①	②	
		(X)	* 46. show that the client has been placed in employment consistent with the employment objective for which services have prepared the client?	①	②	
		(X)	* 47. show that the suitable employment objective achieved by the client has been maintained for a minimum of 60 days?	①	②	
		(X)	* 48. document that the client was informed in writing of the closure action taken?	①	②	
		(X)	* 49. show that the action taken and outcome were reported to other agencies, as appropriate?	①	②	③
		(X)	* 50. show that the client was referred to other agencies and facilities, as appropriate?	①	②	③
			* 51. show that as part of the process of being determined rehabilitated, the client was informed . . .			
		(X)	*a. of eligibility to receive necessary post-employment services?	①	②	
		(X)	*b. of the purpose for such post-employment services?	①	②	
		(X)	*c. of any plans for such post-employment services?	①	②	
		(X)	*d. that the client should contact the counselor, especially during the first year following the determination as rehabilitated, before leaving the job, or if problems arise jeopardizing the job?	①	②	

* Required for conformance with Regulations and Guidelines.

For questions 52 through 58, please answer with:

① = LESS THAN ADEQUATE
② = ADEQUATE
③ = NOT APPLICABLE (N/A)

ELIG.	IWRP	SUPP. EVAL.	SECTION VII: TERMINATION OF CASES - STATUS 26	ANSWER		
				LESS	ADEQ.	N/A
			How well does the counselor documentation in the case record . . .			
		(X)	* 52. show that there is a relationship between the services rendered and the vocational outcome?	①	②	
		(X)	* 53. show that substantial services (those having a discernible impact on the client's employability) were rendered to the client?	①	②	
			54. show that substantial placement services were provided to the client toward the acquisition of a suitable occupation, including:			
		(X)	a. an evaluation of the client's job readiness?	①	②	③
			b. guidance in the development and execution of the client's plan for job seeking activities?	①	②	③
		(X)	c. instruction in making job applications?	①	②	③
		(X)	d. instruction in client conduct during interviews?	①	②	③
		(X)	e. employer contact?	①	②	③
			f. client registration with the State employment service?	①	②	③
			g. job analysis and modification?	①	②	③
		(X)	h. consultation with employers or supervisors, as required?	①	②	③
		(X)	i. efforts in the area of selective placement if the client is severely disabled?	①	②	③
			* 55. show that the following conditions of a suitable placement have been met, insofar as possible:			
		(X)	*a. the client and the employer are each satisfied?	①	②	③
		(X)	*b. the client is maintaining adequate interpersonal relationships?	①	②	
		(X)	*c. the client is maintaining acceptable behavior in the job environment?	①	②	
		(X)	*d. the occupation is consistent with the client's capacities and abilities, considering the client's choice?	①	②	
		(X)	*e. the client possesses acceptable skills to perform or continue the work satisfactorily?	①	②	
		(X)	*f. the employment and working conditions will not aggravate the client's disability?	①	②	
		(X)	*g. the client's employment situation will not jeopardize the health or safety of the client or others?	①	②	
		(X)	*h. the employment is regular and reasonably permanent?	①	②	
		(X)	*i. the client receives a wage commensurate with that paid others for similar work under legal requirements?	①	②	③

* Required for conformance with Regulations and Guidelines.

ELIG.	IWRP	SUPP. EVAL.	SECTION VII: TERMINATION OF CASES - STATUS 26 (continued)	ANSWER LESS	ADEQ.	N/A
			How well does the counselor documentation in the case record . . .			
			* 56. support the reason and justification for closing the case, including:			
		(X)	*a. the employment status of the client?	①	②	
		(X)	*b. the basis on which employment was determined to be suitable?	①	②	
			57. show that when the client accepts a job which fails to meet one or more of the suitability criteria (specified in 55 a-i above), the counselor has:			
		(X)	a. explained the unsuitable aspect(s) of the job?	①	②	③
		(X)	b. indicated that the client has made the job choice in light of these facts?	①	②	③
		(X)	c. informed the client of the right to reapply for services if the job proves unsuitable or the need arises for further services?	①	②	③
		(X)	58. support the justification for closing the case when suitably criteria were not met, including the consideration of alternatives?	①	②	③

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* Required for conformance with Regulations and Guidelines.

SECTION VIII: TIMELINESS RESEARCH AND COMMENTS

A. TIMELINESS

INSTRUCTIONS: As indicators of timeliness in the various phases in the rehabilitation process, consider where applicable the information listed below pertaining to each of the status increments in columns A, B, and C, when responding to questions 1-3.

A. Status 00-08/10 Referral (in) Eligibility	Time lapses between referral/application of the client and the initial client interview, the request for information, the receipt of information on the client, additional diagnostic services, extended evaluation (if applicable), and any gaps between or during these events and the final eligibility decision and notification.
B. Status 10-12 (Eligibility-Plan Approval)	Time lapses between eligibility determination and IWRP approval, amount of frequency of client contact during plan development.
C. Status 12-26/28/30 (Plan Approval-Closure)	Time lapses between IWRP approval and initiation of services, duration of service receipt, contact with service providers schedules for counseling, authorizations for payment/purchase, client counselor contact, job availability, employer contacts, case record documentation and regular intervals and gaps in the process especially between status 22, placement, and closure (where applicable).

	ANSWER COLUMNS								
	A(00-08/10)			B(10-12)			C(12-26/28/30)		
	Yes	No	N/A	Yes	No	N/A	Yes	No	N/A
1. Was the client served in a timely manner? (i.e., without undesirable or unintended time lapses).	①	②		①	②		①	②	
2. If no, was the delay sufficiently explained in the case record?	①	②	③	①	②	③	①	②	③
3. If explained, was the delay caused by: (answer each)									
a) No response by client?	①	②	③	①	②	③	①	②	③
b) Client indecision?	①	②	③	①	②	③	①	②	③
c) Client unavailability?	①	②	③	①	②	③	①	②	③
d) No contact by counselor?	①	②	③	①	②	③	①	②	③
e) No action by counselor?	①	②	③	①	②	③	①	②	③
f) No counselor assigned?	①	②	③	①	②	③	①	②	③
g. Administrative delays?	①	②	③	①	②	③	①	②	③
h) Lack of resources?	①	②	③	①	②	③	①	②	③
i) Delay in receiving reports?	①	②	③	①	②	③	①	②	③
j) Interagency delays?	①	②	③	①	②	③	①	②	③
k) Lack of placement opportunities?	①	②	③	①	②	③	①	②	③
l) Other? (specify________________________)	①	②	③	①	②	③	①	②	③

SECTION VIII: TIMELINESS RESEARCH AND COMMENTS

B. REVIEWER COMMENTS

Please use the space below to provide any comments or feelings you may have about the case record. As an example, your evaluation of the documentation may reflect compliance with the Federal Regulations and Guidelines; however, you may feel that the overall picture or that a specific area within the rehabilitation process (i.e., the nature and/or scope of services, the counselor/client relationship, the counselor's creativity, the clarity or organization of the case record, etc.) deserves comment. This space may also be used to document specific problems encountered in the review.

Thank you.